

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001372

FILED
Jan 05, 2012
Secretary of State

Entity Name: SILVESTER FOUNDATION, INC.

Current Principal Place of Business:

470 COLUMBIA DRIVE
SUITE D-201
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

470 COLUMBIA DRIVE
SUITE D-201
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 04-3678278 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREBOOM, DOUGLASS E
470 COLUMBIA DRIVE
SUITE D-201
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD
Name: SILVESTER, ARTHUR W JR.
Address: 1990 N.E. OCEAN BLVD.
City-St-Zip: STUART, FL 34996

Title: VD
Name: CARLTON, KATHY
Address: 1990 N.E. OCEAN BLVD.
City-St-Zip: STUART, FL 34996

Title: TD
Name: PEREBOOM, DOUGLASS E
Address: 470 COLUMBIA DR., SUITE D201
City-St-Zip: W. PALM BEACH, FL 33409

Title: S
Name: DEMPSEY, W. GLENN
Address: 250 S. AUSTRALIAN AVENUE, STE 601
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D
Name: SILVESTER, RENEE T
Address: 350 DEVONSHIRE WAY, APT. 3329
City-St-Zip: PALM BEACH GARDENS, FL 33418

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ARTHUR W. SILVESTER, JR

PD

01/05/2012

Electronic Signature of Signing Officer or Director

_____ Date