# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 24, 2009**
**Secretary of State**

DOCUMENT# N04000008502

**Entity Name:** PALM BEACH CANCER FOUNDATION, INC.

**Current Principal Place of Business:**

14492 STIRRUP LANE
WELLINGTON, FL 33414

**New Principal Place of Business:**

**Current Mailing Address:**

14492 STIRRUP LANE
WELLINGTON, FL 33414

**New Mailing Address:**

**FEI Number: 20-1624369** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

OHARA, JANET L
14492 STIRRUP LANE
WELLINGTON, FL 33414 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: CEO ( ) Delete
Name: O'HARA, JANET
Address: 14492 STIRRUP LANE
City-St-Zip: WELLINGTON, FL 33414

Title: PD ( ) Delete
Name: O'HARA, PATRICK
Address: 14492 STIRRUP LANE
City-St-Zip: WELLINGTON, FL 33414

Title: VPD ( ) Delete
Name: JOSEPH, KULMALA
Address: 9629 150TH COURT NO.
City-St-Zip: JUPITER, FL 33478

Title: SD ( ) Delete
Name: FROYEN, ROBERT
Address: 14492 STIRRUP LANE
City-St-Zip: WELLINGTON, FL 33414

Title: CHMD ( ) Delete
Name: O'HARA, JANET L
Address: 14492 STIRRUP LANE
City-St-Zip: WELLINGTON, FL 33414

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JANET L. O'HARA CHMD 02/24/2009
Electronic Signature of Signing Officer or Director — Date