2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2009
Secretary of State

DOCUMENT# N05000004345

Entity Name: HANLEY CENTER FOUNDATION, INC.

Current Principal Place of Business:

933 45TH STREET
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

933 45TH STREET
WEST PALM BEACH, FL 33407

New Mailing Address:

FEI Number: 20-2871945 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KRANTZ, BARBARA A
933 45TH STREET
WEST PALM BEACH, FL 33407 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:	CD	( ) Delete
Name:	MYERS, JIM	
Address:	1249 BREAKERS WEST BLVD	
City-St-Zip:	WEST PALM BEACH, FL 33411	
Title:	TD	( ) Delete
Name:	HELLAWELL, RICHARD	
Address:	11103 GREEN BAYBERRY DRIVE	
City-St-Zip:	PALM BEACH GARDENS, FL 33418	
Title:	SD	( ) Delete
Name:	HAMILTON MICHAELS, ANITA	
Address:	425 WORTH AVE 5E	
City-St-Zip:	PALM BEACH, FL 33480	
Title:	D	( ) Delete
Name:	KERESEY, ANNE S	
Address:	145 PERUVIAN WAY, #302	
City-St-Zip:	PALM BEACH, FL 33480	
Title:	D	( ) Delete
Name:	LEWIS, PHILIP D	
Address:	PO BOX 9726	
City-St-Zip:	RIVERO BEACH, FL 33419	
Title:	D	( ) Delete
Name:	MOFFITT, BROWER	
Address:	224 PLYMOUTH ROAD	
City-St-Zip:	WEST PALM BEACH, FL 33405	

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:	D	(X) Change ( ) Addition
Name:	PRICE, HENRY	
Address:	381 S. LAKE DRIVE	
City-St-Zip:	PALM BEACH, FL 33480	
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: BARBARA A. KRANTZ CEO 04/08/2009

Electronic Signature of Signing Officer or Director — Date