

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000008822

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Entity Name:** PALMS WEST COMMUNITY FOUNDATION, INC.

**Current Principal Place of Business:**

13901 SOUTHERN BLVD  
LOXAHATCHEE, FL 33470

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1062  
LOXAHATCHEE, FL 33470

**New Mailing Address:**

**FEI Number:** 20-5476733

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPILLANE, J P  
12778 W FOREST HILL BLVD  
STE 2005  
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: TD  
Name: WESCOTT, TERRI  
Address: 134 SARATOGA BLVD E  
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: PD  
Name: BISHOP, JEFFREY  
Address: 1760 ANONDALE CIRCLE  
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: SD  
Name: VESPO, DAVID  
Address: 412 LUCERNE AVE  
City-St-Zip: LAKE WORTH, FL 33460

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: TERRI WESCOTT

TD

04/11/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date