

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010099

FILED
Jan 14, 2011
Secretary of State

Entity Name: WEST PALM BEACH PARENT GROUP, INC

Current Principal Place of Business:

100 CHILLINGWORTH
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

100 CHILLINGWORTH
WEST PALM BEACH, FL 33407

New Mailing Address:

FEI Number: 75-3258971

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURKE, EVORN L
100 CHILLINGWORTH DR
WEST PALM BEACH, FL 334043340 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: P
Name: POITER, KENNETH
Address: 1691 NORTH SEA CREAT BLVD
City-St-Zip: BOYNTON BEACH, FL 33435

Title: V
Name: FERJUSTE, RICHARD
Address: 1500 NORTH CONGRESS AVE A -21
City-St-Zip: WEST PALM BEACH, FL 33401

Title: T
Name: STEPHENSON, KYMEKA
Address: 200 LAKEN DR.
City-St-Zip: WEST PALM BEACH, FL 33409

Title: S
Name: MOORE-COLBERT, KE'OCEAN
Address: 619 6 STREET APT.# C
City-St-Zip: WEST PALM BEACH, FL 33401

Title: M
Name: MCDONAL, AMY
Address: 1008 ABRAHAM AVENUE
City-St-Zip: WEST PALM BEACH, FL 33409

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: EVORN BURKE

RA

01/14/2011

Electronic Signature of Signing Officer or Director

Date