FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # No. 1. Corporation Name

Principal Place of Business

N09595

(2)

Mailing Address

ALZHEIMER'S ASSOCIATION GREATER PALM BEACH AREA CHAPTER, INC.

6401 CONGRESS AVENUE SUITE 265 BOCA RATON FL 33487		6401 CONGRESS AVENUE SUITE 265 BOCA RATON FL 33487-2824		3. Date Incorporated or Qualified 3a. Date of Last Report 06/04/1985 02/19/1996		
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
		26		59-2503887	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution Added to Fees		
Zıp	Country	Zip	Country	8. This corporation has liability for int		
24	25	29	30		Yes No	
9, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 81 Name						
PARALES AMBULA						
BARNES, MARY M.				82 Street Address (P.O. Box Number is Not Acceptable) 1861 Woodfern Drive		
501 MONTEREY SQUARE BOYNTON BEACH FL 33438			B3 1.00	woodtern prive		
BOTHIO	N BEAUTI PL 33430					
			84 City	stan Baanh	FL 85 Zip Code 33436	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered						
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.						
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE		
TITLE	D	☐ DELETE	1.1 TITLE	P	Change 😾 Addition	
NAME	ZINK, CHARLES		1.2 NAME	Thompson, Nancy E.		
STREET ADDRESS	7800 CLOVER FIELD CIRCLE		1.3 STREET ADDRESS	924 Sun Acres Lane		
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY - ST - ZIP	Boynton Beach, FL	33436	
TITLE	D	DELETE	2.1 TITLE	VP -	Change Addition	
NAME	COHEN, CAROLYN	•	2.2 NAME	Bahen Jack		
STREET ADDRESS	901 EAST CAMINO REAL #9-	C .	2.3 STREET ADDRESS	9020 Villa Portofin		
CITY-ST-ZIP	BOCA RATON FL	□ SELETE	2. 4 CITY-ST-ZIP	Boca Raton, FL 334	96	
TITLE	D OLARIV OAM	☐ DELETE	3.1 TITLE	D 2	Change Addition	
NAME	CLARK, SAM		3.2 NAME	Frank, John		
STREET ADDRESS	28 BURNING TREE LANE BOCA RATON FL		3.3 STREET ADORESS	3639 SW 24th Lane Delray Beach, FL 33	A A E	
CITY-ST-ZIP TITLE	D BOOK MATOR FE	⊠ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	T Beach, FL 33	Change X Addition	
NAME	JABLIN, CHARLOTTE		4.2 NAME	Tammany, Joseph	Second Accounting Application of the Control of the	
STREET ADDRESS	901 EAST CAMINO REAL #3-	C	4.3 STREET ADDRESS	899 SE 2nd Ave #121	•	
CITY-ST-ZIP	BOCA RATON FL	•	4.4 CITY-ST-ZIP	Deerfield Beach, FL	33441	
TITLE	D	☐ DELETE	5.1 TITLE	D	Change 🔀 Addition	
NAME	LAMM, ROBERT		5.2 NAME	Eisner, Larry		
STREET ADDRESS	2588 NW 64TH BLVD.		5.3 STREET ADDRESS	5458 Town Center Rd	, Suite 5	
CITY-ST-ZIP	BOCA RATON FL		5.4 CITY - ST - ZIP	Boca Raton, FL 3348	6	
TITLE	P	K DELETE	6.1 TITLE	D	Change Addition	
NAME	REYES, HORTENSIA		6.2 NAME	Sadowsky, Carl H.		
STREET ADDRESS	2443 FLORIDA ST		6.3 STREET ADDRESS	5205 Greenwood Ave,		
CITY-ST-ZIP	WEST PALM BEACH FL	1 10 AL 1 20	6.4 CITY-ST-ZIP	West Paln Beach, FL	33407	
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 49 if charged of on an attachment with an address.						

SIGNATURE: STOPH COMMENTED

January 22, 1997

Daylime Phone # 0045171

FILED

Jan 31 1997 8:00am

Secretary of State