

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44497

FILED
Mar 31, 2011
Secretary of State

Entity Name: C.L. BRUMBACK HEALTH CENTER GOVERNING BOARD, INC. OF PALM BEACH COUNTY

Current Principal Place of Business:

38754 STATE ROAD 80
BELLE GLADE, FL 33430

New Principal Place of Business:

Current Mailing Address:

38754 STATE ROAD 80
BELLE GLADE, FL 33430

New Mailing Address:

FEI Number: 65-0360350

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LOBBAN-MARSAN, JACQUELINE EXE DIR
38754 STATE ROAD 80
BELLE GLADE, FL 33430 US

Name and Address of New Registered Agent:

LOBBAN-MARSAN, JACQUELINE EXE DIR
800 CLEMATIS
FLOOR: 05 ROOM: 534
WEST PALM BEACH, FL 33401 US

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:

03/31/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C
Name: DR. DORAN, RUTH
Address: 110 NORTH F STREET
City-St-Zip: LAKE WORTH, FL 33460

Title: VC
Name: WHITE, SHIRLEY
Address: 3180 N HAVERHILL ROAD APT 104
City-St-Zip: WEST PALM BEACH, FL 33417

Title: S
Name: WALKER, BLANCA E
Address: 390 JUNIPER AVENUE
City-St-Zip: PAHOKEE, FL 33476

Title: T
Name: WINNIE, GIPSON D
Address: 1421 S.W. 4TH STREET
City-St-Zip: DELRAY BEACH, FL 33444

Title: M
Name: MERICANTANTE, FR. JOHN
Address: 1200 EAST MAIN STREET
City-St-Zip: PAHOKEE, FL 33476

Title: M
Name: NAVARRO, FRANCES
Address: 4757 SUNNY PALM PALM COURT APT. A
City-St-Zip: WEST PALM BEACH, FL 33415

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: JACQUELINE LOBBAN-MARSAN

DIR

03/31/2011

Electronic Signature of Signing Officer or Director

Date

POSTED JOURNAL TRANSACTIONS BY SWDN WITHIN BENEFITTING OLO AND SITE

AUDIT LOCATION - STATEWIDE
OLO 450000 - DEPARTMENT OF STATE
SITE 00 - DEPARTMENT OF STATE
SWDN D1000550286 ADOCNO V002623

OLO 640000 - DEPARTMENT OF HEALTH
SITE 50 - PALM BEACH CHD - JOHN J CAMPBELL
(561)671-4100

ACCOUNT CODE	CF	TC	OBJECT	AMOUNT	ACCOUNT CODE	BENEFITTING DATA	CF	TC	OBJECT
64 20 2 141001 64200700 50 040000 00		25	4990	70.00	45 10 1 000132 45300100 00 000100 00			45	
					INVOICE # N44497				
TRANSACTION CODE TOTAL - 25			70.00	45				70.00	

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