FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 21 AM 9:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N93000005209 (2)

1. Corporation Name

MENTAL HEALTH ASSOCIATION OF PALM BEACH COUNTY, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
909 FERN ST. WEST PALM BEACH FL 33401	909 FERN ST. WEST PALM BEACH FL 33401

3. Date Incorporated or Qualified: **11/17/1993**
3a. Date of Last Report: **02/04/1994**
4. FEI Number: **59-0760220** ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
TAYLOR, REBECCA C 909 FERN ST. WEST PALM BEACH FL 33401	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Rebecca Taylor — March 31, 1995
(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	13.1 TITLE	☐ Change ☐ Addition
NAME	POTTER, MARJORIE	13.2 NAME	
STREET ADDRESS	3111 45TH ST., #4	13.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL 33407	13.4 CITY-ST-ZIP	
TITLE	DS	13.1 TITLE	DS ☐ Change ☒ Addition
NAME	CAPAROSA, KYLE	13.2 NAME	Albert Krassner
STREET ADDRESS	230 ROYAL PALM, #209	13.3 STREET ADDRESS	450 South Ocean Boulevard, #305C
CITY-ST-ZIP	PALM BEACH FL 33480	13.4 CITY-ST-ZIP	Manalapan, FL 33462
TITLE	DV	13.1 TITLE	☐ Change ☐ Addition
NAME	KLEIN, STUART	13.2 NAME	
STREET ADDRESS	1551 FORUM PLACE, #400B	13.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	13.4 CITY-ST-ZIP	
TITLE	T	13.1 TITLE	☒ Change ☐ Addition
NAME	ROSNER, NORTON	13.2 NAME	DV
STREET ADDRESS	17831 HEATHER RIDGE LANE	13.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33498	13.4 CITY-ST-ZIP	
TITLE	V	13.1 TITLE	☐ Change ☒ Addition
NAME	SPECTOR, JOELLEN	13.2 NAME	DV
STREET ADDRESS	6 LAGOMAR	13.3 STREET ADDRESS	Stephen McGraw
CITY-ST-ZIP	PALM BEACH FL 33480	13.4 CITY-ST-ZIP	10261 North 159th Coujt Jupiter, FL 33471
TITLE	V	13.1 TITLE	T ☐ Change ☒ Addition
NAME	GARRITY, JOAN T	13.2 NAME	Kenneth Meuser
STREET ADDRESS	1957 CANTERBURY CIRCLE	13.3 STREET ADDRESS	200 E. Broward Blvd. #2000
CITY-ST-ZIP	WEST PALM BEACH FL 33414	13.4 CITY-ST-ZIP	Fort Lauderdale, FL 33394

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Marjorie Potter — (407) 688-1994
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0591694

N93000057209

mental health association

OF PALM BEACH COUNTY

909 FERN STREET, WEST PALM BEACH, FLORIDA 33401-5796

(407) 832-3755 • (407) 276-3581 (SOUTH COUNTY) • FAX (407) 832-3900

Board of Directors
Members not included on attached Corporation Annual Report

Joan Williams
3304 Lakemont Court
Lake Park, FL 33403

Joan T. Garrity
1957 Canterbury Circle
West Palm Beach, FL 33414

Roy Chernoff
248 Sandpiper Drive
Palm Beach, FL 33480

Marilyn Cohen
226 Ridgeview Drive
Palm Beach, FL 33480

Myles L. Cooley
30 Cambria Road West
Palm Beach Gardens, FL 33418

Miriam Davis
3000 North Ocean Drive #22B
Singer Island, FL 33404

Harriet Goldstein
336 Pennington
Royal Palm Beach, FL 33411

David A. Gross
2771 NW 28th Street
Boca Raton, FL 33434

Joann Hendelman
2700 PGA Boulevard
Palm Beach Gardens, FL 33410

Webster Hurley
159 Thornton Drive
Palm Beach Gardens, FL 33418

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Alice Meyerson
17766 Heather Ridge Lane
Boca Raton, FL 33498

Joseph O'Hagan
1112 Country Club Circle
North Palm Beach, FL 33408

John Phillips
300 North Dixie Highway, #441
West Palm Beach, FL 33401

David Richardson
3228 Gun Club Road
West Palm Beach, FL 33406

Jose Rodriguez
2240 Palm Beach Lakes Boulevard
Suite 200
West Palm Beach, FL 33409

JoEllen Spector
6 Lagomar
Palm Beach, FL 33480

Ben Starling III
Post Office Box 2857
Palm Beach, FL 33480

Carolyn Susman
206 Greymon Drive
West Palm Beach, FL 33405

Bruce Sylvester
261 Granada Road
West Palm Beach, FL 33401

Kathleen Ulrichny
454 SW Salerno Road
Stuart, FL 34997

Ralph Warren
141 South County Road
Palm Beach, FL 33480

Kathleen Weaver
9 Uno Lago Drive
Juno Beach, FL 33408