## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000002973

Apr 07, 2011 Secretary of State

Entity Name: R. CATHLEEN COX MCFARLANE CHARITABLE FOUNDATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

456 WORTH AVE 622 NORTH FLAGLER DRIVE PALM BEACH, FL 33480

201

WEST PALM BEACH, FL 33401

**Current Mailing Address: New Mailing Address:** 

515 NORTH FLAGLER DRIVE 1800 WEST PALM BEACH, FL 33401

FEI Number: 65-0856300 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

O'CONNELL, BRIAN M 515 NORTH FLAGLER DRIVE 1800 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:

Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:** 

ROSS, WALTER M Name:

Address: 622 NORTH FLAGLER DRIVE, #201 City-St-Zip: WEST PALM BEACH, FL 33401

Title: D. S

Name: PETERSON, CHRISTY Address: 632 EAST OCEAN AVENUE City-St-Zip: BOYNTON, FL 33435

Title:

HEALEY, BRIDGET C Name:

Address: 4122 LAKESPUR CIRCLE SOUTH City-St-Zip: PALM BEACH GARDENS, FL 33410

Title:

Name: SMITH, JEFFREY

622 NORTH FLAGLER DRIVE #201 Address: City-St-Zip: WEST PALM BEACH, FL 33401

Title:

COLEMAN, DENIS P Name: 662 ISLAND DRIVE Address: PALM BEACH, FL 33480 City-St-Zip:

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: CHRISTY L. PETERSON DIR 04/07/2011