2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751373

Entity Name: SICKLE CELL FOUNDATION OF PALM BEACH COUNTY, INC.

FILED
Jan 17, 2025
Secretary of State
6282935367CC

Current Principal Place of Business:

815 PALM BEACH LAKES BLVD. WEST PALM BCH. FL 33401

Current Mailing Address:

155 E. BLUE HERON BLVD.

SUITE 402

RIVIERA BEACH, FL 33404 US

FEI Number: 59-1975315 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HUDNELL, CHARLIE B 815 PALM BEACH LAKES BLVD. 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: CHARLIE B. HUDNELL 01/17/2025

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title CHAIR EMERITUS Title CEO

Name HUDNELL, CHARLIE B Name WARREN, SHALONDA L

Address 155 E. BLUE HERON BLVD Address 155 E. BLUE HERON BLVD

SUITE 402 SUITE 402

City-State-Zip: RIVIERA BEACH FL 33404 City-State-Zip: RIVIERA BEACH FL 33404

Title CHAIRMAN Title VC

Name GORDON, KATIE M Name ARP, DODGER ESQ.

Address 155 E. BLUE HERON BLVD Address 155 E. BLUE HERON BLVD.

SUITE 402 SUITE 402

City-State-Zip: RIVIERA BEACH FL 33404 City-State-Zip: RIVIERA BEACH FL 33404

Title TREASURER Title SECRETARY

Name KELLY-HART, KENNETH Name JOHNSON, TONYA DAVIS

Address 155 E. BLUE HERON BLVD. Address 155 E. BLUE HERON BLVD.

SUITE 402 SUITE 402

City-State-Zip: RIVIERA BEACH FL 33404 City-State-Zip: RIVIERA BEACH FL 33404

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: SHALONDA WARREN

CEO

01/17/2025