2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2015
Secretary of State
CC9546596288

DOCUMENT# 751373

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

Current Principal Place of Business:

1600 N AUSTRALIAN AVE
WEST PALM BCH, FL 33407

Current Mailing Address:

1600 N AUSTRALIAN AVE
WEST PALM BCH, FL 33407 US

FEI Number: 59-1975315

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HUDNELL, CHARLIE B
1600 N AUSTRALIAN AVE
WEST PALM BEACH, FL 33407 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 02/25/2015

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	C	Title	S
Name	HUDNELL, CHARLIE B	Name	TAYLOR, KEELY-GIDEON
Address	1600 N AUSTRALIAN AVE	Address	1600 N AUSTRALIAN AVE
City-State-Zip:	WEST PALM BCH FL 33407	City-State-Zip:	WEST PALM BEACH FL 33407
Title	CEO	Title	VC
Name	WARREN, SHALONDA L	Name	HAYDEN, FRANK
Address	1600 N AUSTRALIAN AVE	Address	1600 N AUSTRALIAN AVE
City-State-Zip:	WEST PALM BCH FL 33407	City-State-Zip:	WEST PALM BCH FL 33407

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 CHIEF EXECUTIVE OFFICER 02/25/2015

Electronic Signature of Signing Officer/Director Detail — Date