

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764489

Entity Name: WEST PALM BEACH POLICE FOUNDATION, INC.**Current Principal Place of Business:**600 BANYAN BLVD
WEST PALM BEACH, FL 33401**Current Mailing Address:**PO BOX 851
WEST PALM BEACH, FL 33402 US**FEI Number:** 59-2293239**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WEISS, GREGG
615 KANUGA DR.
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

Officer/Director Detail :

Title DIRECTOR
Name WEISS, GREGG
Address PO BOX 851
City-State-Zip: WEST PALM BEACH FL 33402

Title VP, DIRECTOR
Name HOLTZ, SCOTT
Address PO BOX 851
City-State-Zip: WEST PALM BEACH FL 33402

Title TREASURER, DIRECTOR
Name GUREVITZ, RICHARD
Address PO BOX 851
City-State-Zip: WEST PALM BEACH FL 33402

Title DIRECTOR
Name BRAYMES, MIA
Address PO BOX 851
City-State-Zip: WEST PALM BEACH FL 33402

Title VP, DIRECTOR
Name FREIDMAN, MICHAEL
Address PO BOX 851
City-State-Zip: WEST PALM BEACH FL 33402

Title PRESIDENT, DIRECTOR
Name CHESTER, DON
Address PO BOX 851
City-State-Zip: WEST PALM BEACH FL 33402

Title SECRETARY, DIRECTOR
Name BARBERICH, LEE
Address PO BOX 851
City-State-Zip: WEST PALM BEACH FL 33402

Title DIRECTOR
Name SARGENT, MARY
Address PO BOX 851
City-State-Zip: WEST PALM BEACH FL 33402

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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: RICHARD S GUREVITZ**DIRECTOR - TREASURER 04/06/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name FURMAN, IRA
Address PO BOX 851
City-State-Zip: WEST PALM BEACH FL 33402

Title DIRECTOR
Name LUNDQUIST, PETER
Address PO BOX 851
City-State-Zip: WEST PALM BEACH FL 33402

Title DIRECTOR
Name BERNHARDT, DAVID
Address PO BOX 851
City-State-Zip: WEST PALM BEACH FL 33402

Title DIRECTOR
Name LUTTIER, HEATHER
Address PO BOX 851
City-State-Zip: WEST PALM BEACH FL 33402