**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**
**Feb 22, 2018**
**Secretary of State**
**CC7751334842**

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

| | |
|---|---|
| Title | VP |
| Name | LEHMAN, TERRY |
| Address | PO BOX 851 |
| City-State-Zip: | WEST PALM BEACH FL 33402 |

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

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

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

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

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

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

**Continues on page 2**

*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: GREGG K WEISS PRESIDENT 02/22/2018

Electronic Signature of Signing Officer/Director Detail — Date

**Officer/Director Detail Continued :**

| | |
|---|---|
| Title | DIRECTOR |
| Name | DAVIS, SARAH |
| Address | PO BOX 851 |
| City-State-Zip: | WEST PALM BEACH FL 33402 |

| | |
|---|---|
| Title | DIRECTOR |
| Name | MAY, PHILIP |
| Address | PO BOX 851 |
| City-State-Zip: | WEST PALM BEACH FL 33402 |

| | |
|---|---|
| Title | DIRECTOR |
| Name | FURMAN, IRA |
| 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 |