

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000004292

**FILED**  
**Feb 24, 2016**  
**Secretary of State**  
**CC0567534629**

**Entity Name:** P.C.A.D.B. ASSOCIATION, INC.

**Current Principal Place of Business:**

4205 WEST ATLANTIC AVE.  
DELRAY BEACH, FL 33445

**Current Mailing Address:**

2737 S CLEARBROOK CIR  
DELRAY BEACH, FL 33445

**FEI Number:** 20-2824988

**Certificate of Status Desired:** No

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

FRANCO, DIANE  
2737 S CLEARBROOK CIR  
DELRAY BEACH, FL 33445 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 PSTD  
Name FRANCO, DIANE  
Address 2737 S CLEARBROOK CIR  
City-State-Zip: DELRAY BEACH FL 33445

Title VPD  
Name KASTEN, ANN G DR.  
Address 1445 N.W. BOCA RATON BLVD.  
City-State-Zip: BOCA RATON FL 33432

Title D  
Name AKER, ALAN B DR.  
Address 1445 NW BOCA RATON BLVD  
City-State-Zip: BOCA RATON FL 33432

*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:** DIANE FRANCO

**PRES.**

**02/24/2016**

Electronic Signature of Signing Officer/Director Detail

Date