

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004345

Entity Name: HANLEY CENTER FOUNDATION, INC.**Current Principal Place of Business:**933 45TH ST
WEST PALM BEACH, FL 33407**Current Mailing Address:**933 45TH ST
WEST PALM BEACH, FL 33407 US**FEI Number:** 20-2871945**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HOUGH, JOHN HARRISON
C/O MURPHY REID
11300 US HIGHWAY ONE STE 401
PALM BEACH GARDENS, FL 33408 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:** LILLIAN DAVENPORT ON BEHALF OF JOHN HOUGH

04/18/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CHAIRMAN
Name	JAMES, CHARLES
Address	933 45TH ST
City-State-Zip:	WEST PALM BEACH FL 33407

Title	VC
Name	HANLEY, MICHAEL J
Address	933 45TH ST
City-State-Zip:	WEST PALM BEACH FL 33407

Title	SECRETARY
Name	GALLAGHER, THOMAS
Address	933 45TH ST
City-State-Zip:	WEST PALM BEACH FL 33407

Title	TREASURER
Name	ARSENAULT, GERARD
Address	933 45TH ST
City-State-Zip:	WEST PALM BEACH FL 33407

Title	CEO
Name	DOCEKAL, RACHEL PAPPERT ED.D
Address	933 45TH ST
City-State-Zip:	WEST PALM BEACH FL 33407

Title	CFO
Name	DAVENPORT, LILLIAN MARY
Address	933 45TH ST
City-State-Zip:	WEST PALM BEACH FL 33407

Title	COO
Name	LEE, JENNIFER
Address	933 45TH ST
City-State-Zip:	WEST PALM BEACH 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: LILLIAN DAVENPORT

CFO

04/18/2024

Electronic Signature of Signing Officer/Director Detail

Date