

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003145

Entity Name: COMMUNITY LAND TRUST OF PALM BEACH COUNTY, INC.**Current Principal Place of Business:**4938 DAVIS ROAD
WEST PALM BEACH, FL 33461**Current Mailing Address:**4938 DAVIS ROAD
LAKE WORTH, FL 33461 US**FEI Number:** 20-5090958**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TEMPLETON, JOHN
2240 PALM BEACH LAKES BLVD.
SUITE 302
WEST PALM BEACH, FL 33409 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	PD
Name	LUCAS, HAZEL
Address	311 SOUTH DIXIE HWY, SUITE # 140
City-State-Zip:	WEST PALM BEACH FL 33405

Title	VPD
Name	KESHAVARZ, MAZIAR
Address	711 N. DIXIE HIGHWAY, SUITE 201
City-State-Zip:	WEST PALM BEACH FL 33401

Title	S
Name	WHEAT, TIM
Address	1921 ABBEY ROAD
City-State-Zip:	WEST PALM BEACH FL 33415

Title	D
Name	USHER, ANGLEA
Address	3300 FOREST HILL BLVD, SUITE C-110
City-State-Zip:	WEST PALM BEACH FL 33406

Title	T
Name	TEMPLETON, JOHN
Address	222 LAKEVIEW AVENUE, SUITE 1200
City-State-Zip:	WEST PALM BEACH FL 33401

Title	D
Name	MORRISON, CHRISTINA
Address	2000 S. OCEAN BLVD., SUITE # 307
City-State-Zip:	DELRAY BEACH FL 33483

Title	EXECUTIVE DIRECTOR
Name	LACOURSE-BLUM, CINDEE A
Address	4938 DAVIS ROAD
City-State-Zip:	WEST PALM BEACH FL 33461

Title	DIRECTOR
Name	MCDONALD ANDERSON, TAMMY
Address	1700 N. AUSTRALIAN AVENUE
City-State-Zip:	WEST PALM BEACH FL 33407

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: CINDEE LACOURSE-BLUM**EXECUTIVE DIRECTOR****01/14/2013**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ELLINGTON, DOROTHY
Address 701 SE 6TH AVENUE, SUITE 201
City-State-Zip: DELRAY BEACH FL 33483

Title DIRECTOR
Name BANKS, SHEVON
Address 1867 NE 5TH STREET
City-State-Zip: BOYNTON BEACH FL 33435

Title DIRECTOR
Name HENRY, TANGENICA
Address 235 BOBWHITE RD
City-State-Zip: ROYAL PALM BEACH FL 33411

Title DIRECTOR
Name SANTANGELO, SEMANTHA
Address P.O. BOX 740241
City-State-Zip: BOYNTON BEACH FL 33474

Title DIRECTOR
Name MAXWELL, SCOTT
Address 7 NORTH DIXIE HWY
City-State-Zip: LAKE WORTH FL 33461