

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000000817

**Entity Name:** PALM BEACH COUNTY SHERIFF'S OFFICE POLICE BENEVOLENT ASSOCIATION, INC.

**FILED**  
**Feb 01, 2022**  
**Secretary of State**  
**4452918439CC**

**Current Principal Place of Business:**

2100 NORTH FLORIDA MANGO ROAD  
WEST PALM BEACH, FL 33409

**Current Mailing Address:**

2100 NORTH FLORIDA MANGO ROAD  
WEST PALM BEACH, FL 33409 US

**FEI Number: 32-0196526**

**Certificate of Status Desired: No**

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

FAGAN, LAWRENCE ESQ  
2100 NORTH FLORIDA MANGO ROAD  
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:** LAWRENCE K. FAGAN

02/01/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           PRESIDENT  
Name           KENNEDY, MICHAEL  
Address        2100 NORTH FLORIDA MANGO ROAD  
  
City-State-Zip: WEST PALM BEACH FL 33409

Title           SECRETARY  
Name           JOSEF, SALLYANN  
Address        2100 NORTH FLORIDA MANGO ROAD  
  
City-State-Zip: WEST PALM BEACH FL 33409

Title           VICE PRESIDENT  
Name           JORDAN, THOMAS  
Address        2100 NORTH FLORIDA MANGO ROAD  
  
City-State-Zip: WEST PALM BEACH FL 33409

Title           VICE PRESIDENT  
Name           UGALDE, CARLOS  
Address        2100 NORTH FLORIDA MANGO ROAD  
  
City-State-Zip: WEST PALM BEACH FL 33409

Title           VICE PRESIDENT  
Name           COSTELLO, JOHN  
Address        2100 NORTH FLORIDA MANGO ROAD  
  
City-State-Zip: WEST PALM BEACH FL 33409

Title           TREASURER  
Name           CARIS, CHRIS  
Address        2100 NORTH FLORIDA MANGO ROAD  
  
City-State-Zip: WEST PALM BEACH FL 33409

Title           SGT - AT - ARMS  
Name           WEST, LAYFORD  
Address        2100 NORTH FLORIDA MANGO ROAD  
  
City-State-Zip: WEST PALM BEACH FL 33409

*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:** MICHAEL KENNEDY

**PRESIDENT**

02/01/2022

Electronic Signature of Signing Officer/Director Detail

Date