

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000000817

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

**FILED**  
**Mar 28, 2024**  
**Secretary of State**  
**5258061917CC**

**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**

**03/28/2024**

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            GLISSON, MARIAM  
Address        2100 NORTH FLORIDA MANGO ROAD  
City-State-Zip: WEST PALM BEACH FL 33409

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

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

Title            VP  
Name            CARIS, CHRISTOPHER  
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**

**03/28/2024**

Electronic Signature of Signing Officer/Director Detail

Date