

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000009344

FILED
May 21, 2017
Secretary of State
CC4883393396

Entity Name: PALM BEACH FIGURE SKATING CLUB, INC.

Current Principal Place of Business:

8125 LAKE WORTH RD.
LAKE WORTH, FL 33467

Current Mailing Address:

8125 LAKE WORTH RD.
LAKE WORTH, FL 33467

FEI Number: 27-4719378

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KANE, JENNIFER
8125 LAKE WORTH RD.
LAKE WORTH, FL 33467 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 URBANSKI, CALLA
Address 8125 LAKE WORTH RD.
City-State-Zip: LAKE WORTH FL 33467

Title SECRETARY
Name ANDERSEN, JANEENE
Address 8125 LAKE WORTH RD.
City-State-Zip: LAKE WORTH FL 33467

Title TD
Name DELISI, KOKO
Address 8125 LAKE WORTH RD.
City-State-Zip: LAKE WORTH FL 33467

Title VP
Name KANE, JENNIFER
Address 8125 LAKE WORTH RD.
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name BORSELLINO, MICHELE
Address 8125 LAKE WORTH RD.
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name KELLEY, STEPHANIE
Address 8125 LAKE WORTH RD
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name DORRIS, XIMENA
Address 8125 LAKE WORTH RD.
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name WALDMAN, BRAD
Address 8125 LAKE WORTH RD.
City-State-Zip: LAKE WORTH FL 33467

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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: CALLA URBANSKI-PETKA

PRESIDENT

05/21/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LEECH, AUDRA
Address 8125 LAKE WORTH RD.
City-State-Zip: LAKE WORTH FL 33467