

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000009344

**FILED**  
**Jun 26, 2019**  
**Secretary of State**  
**1824115533CC**

**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 KELLEY, STEPHANIE  
Address 8125 LAKE WORTH RD.  
City-State-Zip: LAKE WORTH FL 33467

Title SECRETARY  
Name GRAHAM, ED  
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 VENTURA, HEIDI  
Address 8125 LAKE WORTH RD.  
City-State-Zip: LAKE WORTH FL 33467

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

*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: JENNIFER KANE**

**DIRECTOR**

**06/26/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date