SIGNATURE: SALVATORE FASO

Electronic Signature of Signing Officer/Director Detail

# 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# DOCUMENT# N10000011324

## Entity Name: NORTH COUNTY NEIGHBORHOOD COALITION INC.

### **Current Principal Place of Business:**

% NCNC 9055 IBIS BLVD WEST PALM BEACH, FL 33412

#### **Current Mailing Address:**

% NCNC 9055 IBIS BLVD WEST PALM BEACH, FL 33412

### FEI Number: 90-0646748

## Name and Address of Current Registered Agent:

FASO, SALVATORE A % NCNC 9055 IBIS BLVD WEST PALM BEACH, FL 33412 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

Officer/Director Detail :			
Title	PD	Title	VPD
Name	FASO, SALVATORE A	Name	SISSON, HALL
Address	9055 IBIS BLVD	Address	9055 IBIS BLVD
City-State-Zip:	WEST PALM BEACH FL 33412	City-State-Zip:	WEST PALM BEACH FL 33412
Title	TD	Title	SECRETARY
Name	DOWNEY, HOWARD	Name	DINNIN, DAVID
Address	9055 IBIS BLVD	Address	% NCNC
City-State-Zip:	WEST PALM BEACH FL 33412	City-State-Zip:	9055 IBIS BLVD WEST PALM BEACH FL 33412

Certificate of Status Desired: No

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.

Date

PRESIDENT

FILED Mar 22, 2013 Secretary of State CC9406118796

> 03/22/2013 Date