

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000001249

**Entity Name:** LEEDS FOUNDATION PBC, INC.

**Current Principal Place of Business:**

435 SOUTHERN BLVD  
WEST PALM BEACH, FL 33405

**Current Mailing Address:**

435 SOUTHERN BLVD  
WEST PALM BEACH, FL 33405 US

**FEI Number: 45-4440485**

**Certificate of Status Desired: No**

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

ARMOUR, ALAN I  
3001 PGA BLVD  
SUITE #305  
PALM BEACH GARDENS, FL 33410 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           PRESIDENT  
Name           FORD, SUSAN  
Address        435 SOUTHERN BLVD  
City-State-Zip: WEST PALM BEACH FL 33405

Title           D  
Name           FORD, GEORGE  
Address        435 SOUTHERN BLVD  
City-State-Zip: WEST PALM BEACH FL 33405

Title           VP  
Name           FORD, DANIELLE  
Address        435 SOUTHERN BLVD  
City-State-Zip: WEST PALM BEACH FL 33405

Title           DIRECTOR  
Name           WICK, WALTER  
Address        435 SOUTHERN BLVD.  
City-State-Zip: WEST PALM BEACH FL 33405

Title           DIRECTOR  
Name           TAYLOR, MEGHAN  
Address        435 SOUTHERN BLVD.  
City-State-Zip: WEST PALM BEACH FL 33405

Title           TREASURER  
Name           BARTLE, JAMES  
Address        435 SOUTHERN BLVD  
City-State-Zip: WEST PALM BEACH FL 33405

Title           SECRETARY  
Name           WATERBURY, SUSAN  
Address        435 SOUTHERN BLVD  
City-State-Zip: WEST PALM BEACH FL 33405

Title           DIRECTOR  
Name           IVANCEVIC, NICK  
Address        435 SOUTHERN BLVD  
City-State-Zip: WEST PALM BEACH FL 33405

*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: SUSAN FORD**

**PRESIDENT**

**03/29/2025**

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

\_\_\_\_\_  
Date