

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000011094

Entity Name: PALM BEACH CHAPTER OF THE SONS OF THE REVOLUTION
IN THE STATE OF FLORIDA, INC.**FILED**
Apr 18, 2021
Secretary of State
3634492260CC**Current Principal Place of Business:**220 SUNRISE AVENUE
C/O GULFSTREAM GROUP, INC.
PALM BEACH, FL 33480-3869**Current Mailing Address:**PO BOX 38
HOBE SOUND, FL 33475 US**FEI Number: 47-5614050****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ALLAN, ROBB A
220 SUNRISE AVENUE
PALM BEACH, FL 33480-3869 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	DIRECTOR
Name	WEARN, JAMES M
Address	410 EVERNIA ST.
City-State-Zip:	WEST PALM BEACH FL 33401

Title	DIRECTOR
Name	ALLAN, ROBB A
Address	220 SUNRISE AVENUE
City-State-Zip:	PALM BEACH FL 33480-3869

Title	PRESIDENT, DIRECTOR
Name	MCCHRISTIAN, JOSEPH A JR.
Address	PO BOX 2257
City-State-Zip:	HOBE SOUND FL 33475

Title	DIRECTOR
Name	WARD, JAMES G
Address	780 WATERMILL DRIVE
City-State-Zip:	MERRITT ISLAND FL 32952-4138

Title	2VPD, REGISTRAR
Name	GYNN, EDWARD J
Address	241 SUNSET KEY
City-State-Zip:	SEACAUCUS NJ 07094-2213

Title	3VPD
Name	MEYER, JOSEPH P JR.
Address	BOX 3463
City-State-Zip:	PALM BEACH FL 33480

Title	SECRETARY, CHAPLAIN, DIRECTOR
Name	LOWE, DAVID BLACKWELL
Address	220 SUNRISE AVENUE C/O GULFSTREAM GROUP, INC.
City-State-Zip:	PALM BEACH FL 33480-3869

Title	DIRECTOR
Name	WEIMER, DOUGLAS REID
Address	2801 NEW MEXICO AVE., NW #811
City-State-Zip:	WASHINGTON DC 20007

Continues on page 2

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: JOSEPH A. MCCHRISTIAN, JR.**PRESIDENT****04/18/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title FIRST VP, DIRECTOR
Name RICHARDS, WILLIAM BURPEE
Address 220 SUNRISE AVENUE
C/O GULFSTREAM GROUP, INC.
City-State-Zip: PALM BEACH FL 33480-3869

Title DIRECTOR
Name PARMELEE, WILLIAM DOUGLAS
Address 220 SUNRISE AVENUE
C/O GULFSTREAM GROUP, INC.
City-State-Zip: PALM BEACH FL 33480-3869

Title TREASURER, ASST. SECRETARY,
DIRECTOR
Name FISHER III, WILLIAM A.
Address 37 GOMEZ ROAD
City-State-Zip: HOBE SOUND FL 33455