

**2022 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, 2022**  
**Secretary of State**  
**0306283665CC****Current Principal Place of Business:**80 GOMEZ RD  
C/O JOSEPH A. MCCHRISTIAN, JR.  
HOBE SOUND, FL 33455**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:**MCCHRISTIAN, JR., JOSEPH A PRESIDENT  
80 GOMEZ RD  
C/O JOSEPH A. MCCHRISTIAN, JR.  
HOBE SOUND, FL 33455 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:** JOSEPH ALEXANDER MCCHRISTIAN, JR.**04/18/2022**

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** PRESIDENT, DIRECTOR  
**Name** MCCHRISTIAN, JOSEPH A JR.  
**Address** PO BOX 2257  
**City-State-Zip:** HOBE SOUND FL 33475**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** PO BOX 38  
**City-State-Zip:** HOBE SOUND FL 33475**Title** FIRST VP, DIRECTOR  
**Name** RICHARDS, WILLIAM BURPEE  
**Address** PO BOX 38  
**City-State-Zip:** HOBE SOUND FL 33475**Title** TREASURER, ASST. SECRETARY,  
DIRECTOR  
**Name** FISHER III, WILLIAM A.  
**Address** 37 GOMEZ ROAD  
**City-State-Zip:** HOBE SOUND FL 33455**Title** DIRECTOR  
**Name** PARMELEE, WILLIAM DOUGLAS  
**Address** PO BOX 38  
**City-State-Zip:** HOBE SOUND FL 33475

*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 ALEXANDER MCCHRISTIAN, JR.**MR****04/18/2022**

Electronic Signature of Signing Officer/Director Detail

Date