#### 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000012103

Entity Name: URBAN LEAGUE OF PALM BEACH COUNTY FOUNDATION,

INC.

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

1700 NORTH AUSTRAILIAN AVE. WEST PALM BEACH, FL 33407

## **Current Mailing Address:**

1700 NORTH AUSTRAILIAN AVE. WEST PALM BEACH, FL 33407 US

FEI Number: 82-4209303 Certificate of Status Desired: Yes

### Name and Address of Current Registered Agent:

FRANKLIN, PATRICK 1700 N AUSTRALIAN AVE. WEST PALM BEACH, FL 33407 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: PATRICK FRANKLIN

02/22/2022

**FILED** Feb 22, 2022

**Secretary of State** 

3560795240CC

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title CHAIRMAN Titl	e SECRETARY
---------------------	-------------

Name VINER, CLIFFORD Name HUTCHINSON, PHILLIP

Address 1700 NORTH AUSTRAILIAN AVE. Address 1700 NORTH AUSTRAILIAN AVE. City-State-Zip: WEST PALM BEACH FL 33407 City-State-Zip: WEST PALM BEACH FL 33407

Title **OFFICER** Title **OFFICER** 

FRANKLIN, PATRICK Name KANESKI, KENNETH Name

Address 1700 NORTH AUSTRAILIAN AVE. Address 1700 NORTH AUSTRAILIAN AVE. City-State-Zip: WEST PALM BEACH FL 33407 City-State-Zip: WEST PALM BEACH FL 33407

Title **BOARD MEMBER** Title **BOARD MEMBER** Name WADE, RICKY Name BANKS, EMMA

Address 1700 N AUSTRALIAN AVE Address 1700 N AUSTRALIAN AVE

City-State-Zip: WEST PALM BEACH FL 33407 City-State-Zip: WEST PALM BEACH FL 33407

Title **BOARD MEMBER** Title **BOARD MEMBER** Name WILLIAMS, CYNTHIA FRIEDMAN, ROBERT Name Address 1700 N AUSTRALIAN AVE Address 1700 N AUSTRALIAN AVE City-State-Zip: WEST PALM BEACH FL 33407

WEST PALM BEACH FL 33407 City-State-Zip:

# 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: PATRICK FRANKLIN

PRESIDENT & CEO

02/22/2022

# Officer/Director Detail Continued:

TitleBOARD MEMBERTitleBOARD MEMBERNameWARREN, SHARONNameWARREN, OTIS

Address 1700 N AUSTRALIAN AVE Address 1700 N AUSTRALIAN AVE

City-State-Zip: WEST PALM BEACH FL 33407 City-State-Zip: WEST PALM BEACH FL 33407