

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000003117

Entity Name: JUNO BEACH POLICE FOUNDATION, INCORPORATED**Current Principal Place of Business:**340 OCEAN DRIVE
JUNO BEACH, FL 33408**Current Mailing Address:**340 OCEAN DRIVE
JUNO BEACH, FL 33408 US**FEI Number:** 82-4905099**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MURPHY, THOMAS F
340 OCEAN DRIVE
JUNO BEACH, FL 33408 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 VP, DIRECTOR
Name WHEELER, LEWIS P
Address 340 OCEAN DRIVE
City-State-Zip: JUNO BEACH FL 33408Title TREASURER, DIRECTOR
Name LUTHER, JON L
Address 340 OCEAN DRIVE
City-State-Zip: JUNO BEACH FL 33408Title DIRECTOR
Name LARGE, JOHN R
Address 340 OCEAN DRIVE
City-State-Zip: JUNO BEACH FL 33408Title DIRECTOR
Name RYAN, DIANA
Address 340 OCEAN DR
City-State-Zip: JUNO BEACH FL 33408Title PRESIDENT, DIRECTOR
Name MURPHY, THOMAS F
Address 340 OCEAN DRIVE
City-State-Zip: JUNO BEACH FL 33408Title SECRETARY, DIRECTOR
Name ROONEY, JOSEPH A
Address 340 OCEAN DRIVE
City-State-Zip: JUNO BEACH FL 33408Title DIRECTOR
Name ROTHSTEIN, PAUL
Address 340 OCEAN DRIVE
City-State-Zip: JUNO BEACH FL 33408

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: THOMAS F MURPHY

PRESIDENT

03/04/2023

Electronic Signature of Signing Officer/Director Detail_____
Date