

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000009773

Entity Name: PALM BEACH GARDENS POLICE & FIRE RESCUE
FOUNDATION, INC.**Current Principal Place of Business:**10500 NORTH MILITARY TRAIL
PALM BEACH GARDENS, FL 33410**Current Mailing Address:**10500 NORTH MILITARY TRAIL
PALM BEACH GARDENS, FL 33410 US**FEI Number: 42-1748215****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**MOLENDIA, MICHAEL J ESQ.
10500 NORTH MILITARY TRAIL
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	PRES
Name	EDENZON, IRWIN F
Address	117 SAINT EDWARD PLACE
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	VP
Name	MICHAEL, FEDERMAN
Address	196 VIA MARIPOSA
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	SECRETARY
Name	MCCARTEN, JAMES
Address	10500 NORTH MILITARY TRAIL
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	TREASURER
Name	GARDERE, KEITH
Address	11025 RCA CENTER DR. 401
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	VP
Name	GEORGE, ANDREW
Address	3300 PGA BLVD. 800
City-State-Zip:	PALM BEACH GARDENS FL 33410

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: IRWIN EDENZON**PRESIDENT****03/08/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date