

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N24000003848

**Entity Name:** FRENCHMAN'S RESERVE CHARITABLE FOUNDATION, INC.**Current Principal Place of Business:**3370 GRANDE CORNICHE  
PALM BEACH GARDENS, FL 33410**Current Mailing Address:**3370 GRANDE CORNICHE  
PALM BEACH GARDENS, FL 33410**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**OWEN, JACK B JR.  
4500 PGA BLVD., SUITE 200  
PALM BEACH GARDENS, FL 33418 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	D T
Name	DISKIN, ROBERT H
Address	417 SAVOIE DRIVE
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	D
Name	BRESNICK, GERALD I
Address	445 SAVOIE DRIVE
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	D S
Name	WEINSTEIN, BRUCE W
Address	641 HERMITAGE CIRCLE
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	D P
Name	FINE, ROBERT P
Address	237 MONTANT DRIVE
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	D
Name	CICCHITELLI, ALLEN H
Address	118 ABONDANCE DRIVE
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	D VP
Name	HOLMES, KATHY B
Address	709 COTE AZUR DRIVE
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:** ROBERT P. FINE**PRESIDENT****04/24/2025**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date