

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N28161

**FILED**  
**Mar 08, 2023**  
**Secretary of State**  
**3940188125CC**

**Entity Name:** THE HOMELESS COALITION OF PALM BEACH COUNTY, INC.

**Current Principal Place of Business:**

345 SOUTH CONGRESS AVENUE  
DELRAY BEACH, FL 33445

**Current Mailing Address:**

345 SOUTH CONGRESS AVENUE  
DELRAY BEACH, FL 33445 US

**FEI Number:** 65-0125852

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

PAYNE, PAMELA  
345 SOUTH CONGRESS AVENUE  
DELRAY BEACH, FL 33445 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:** PAMELA PAYNE

03/08/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PAST PRESIDENT  
Name DUMARS, PAUL  
Address 882 HIBISCUS DRIVE  
City-State-Zip: ROYAL PALM BEACH FL 33411

Title PRESIDENT  
Name BERGSTROM, CHRISTIAN  
Address 4200 NORTHCORP PKWY  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title TREASURER  
Name BROCK, PETER  
Address 4650 DONALD ROSS RD  
STE 200  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title DIRECTOR  
Name CHESTER, SALLY  
Address 148 BLOOMFIELD DR  
City-State-Zip: WEST PALM BEACH FL 33405

Title DIRECTOR  
Name CROWLEY, JAMES  
Address 777 SOUTH FLAGLER DR  
STE 500 EAST  
City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR  
Name LITT, RACHEL  
Address 10500 N MILITARY TRL  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title VP  
Name D'ANGELO, DINA  
Address 12062 CITRUS GROVE BLVD  
City-State-Zip: WEST PALM BEACH FL 33412

Title DIRECTOR  
Name MCGOVERN, MICHELLE  
Address 345 SOUTH CONGRESS AVENUE  
City-State-Zip: DELRAY BEACH FL 33445

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*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:** PAMELA PAYNE

CEO

03/08/2023

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title SECRETARY  
Name FERGUSON, FRANCES  
Address 17900 BEELINE HIGHWAY  
City-State-Zip: JUPITER FL 33478

Title DIRECTOR  
Name GOERGEDAKIS, SPERO  
Address 50 SOUTH OLD DIXIE HIGHWAY  
City-State-Zip: JUPITER FL 33458

Title DIRECTOR  
Name SCHILLER, NEIL  
Address 137 NW FIRST AVE  
City-State-Zip: DELRAY BEACH FL 33444

Title DIRECTOR  
Name SMALLRIDGE, KELLY  
Address 310 EVERNIA ST  
City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR  
Name PEROULAKIS, THEODORE  
Address 3825 PGA BLVD  
9TH FLOOR  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title CEO  
Name PAYNE, PAMELA  
Address 345 SOUTH CONGRESS AVENUE  
City-State-Zip: DELRAY BEACH FL 33445

Title DIRECTOR  
Name WADE, ANDRE  
Address 1066 BREAKERS WEST BLVD  
City-State-Zip: WEST PALM BEACH FL 33411