Electronic Signature of Signing Officer/Director Detail

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 140184

Entity Name: THE BREAKERS PALM BEACH, INC.

Current Principal Place of Business:

THE BREAKERS PALM BEACH, INC. ONE SOUTH COUNTY ROAD PALM BEACH, FL 33480

Current Mailing Address:

THE BREAKERS PALM BEACH, INC. C/O CORPORATE OFFICE ONE SOUTH COUNTY ROAD PALM BEACH, FL 33480 US

FEI Number: 59-0246320

Name and Address of Current Registered Agent:

PRESSLY, P. KRISTEN LEGAL 40 COCOANUT ROW PALM BEACH, FL 33480 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

Officer/Director Detail :			
Title	VP, CFO, TREASURER	Title	CEO, COO, DIRECTOR
Name	HIRSOWITZ, DARREN	Name	LEONE, PAUL N
Address	ONE SOUTH COUNTY ROAD	Address	ONE SOUTH COUNTY ROAD
City-State-Zip:	PALM BEACH FL 33480	City-State-Zip:	PALM BEACH FL 33480
Title	VP	Title	PRESIDENT
Title Name	VP CHANDRA, ATESH	Title Name	PRESIDENT TAYLOR, TRICIA
Name	CHANDRA, ATESH ONE SOUTH COUNTY ROAD	Name	TAYLOR, TRICIA ONE SOUTH COUNTY ROAD

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

PRESIDENT

SIGNATURE: /S/ TRICIA TAYLOR

Date

FILED Feb 14, 2024 Secretary of State 4179108411CC

Certificate of Status Desired: No

02/14/2024 Date