



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Foreign Non-Profit
Annual Report

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2016

1. Corporate ID No. 000513511

2. Name of Corporation DISCOVER PALM BEACH COUNTY, INC.

3. State of Incorporation

State: FL

4. Corporate Address in Rhode Island

No. and Street: 2 CONGDON AVENUE

City or Town: NEWPORT

State: RI Zip: 02840 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 1555 PALM BEACH LAKES BLVD

SUITE 800

City or Town: WEST PALM BEACH State: FL Zip: 33401 Country: USA

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO PROMOTE, FOSTER AND ENHANCE INCREASED TOURISM THROUGHOUT PALM BEACH COUNTY BY DIRECT MARKETING TO THE NORTHEAST

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JORGE PESQUERA	1555 PALM BEACH BOULEVARD, SUITE 800 WEST PALM BEACH, FL 33401 USA
VICE PRESIDENT	DON KOLODZ	1555 PALM BEACH LAKES, SUITE 800 WEST PALM BEACH, FL 33401 USA
DIRECTOR	JOE CARDENAS	1555 PALM BEACH LAKES BLVD SUITE 800 WEST PALM BEACH, FL 33401 USA
DIRECTOR	VICKI CHOURIS	1555 PALM BEACH LAKES #800

		WEST PALM BEACH, FL 33401 USA
DIRECTOR	JIM MOSTAD	1555 PALM BEACH LAKES BOULEVARD, SUITE 800 WEST PALM BEACH, FL 33401 USA
DIRECTOR	TROY MCLELLAN	1555 PALM BEACH LAKES BLVD #800 WEST PALM BEACH , FL 33401 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

SUSAN CARLSON 2 CONGDON AVENUE NEWPORT , RI 02840

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.

Signed this 13 Day of December, 2016 at 12:50:07 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By JORGE PESQUERA
Signature of Authorized Person

Form No. 631
Revised 09/07

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