

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09876

**Entity Name:** PALM BEACH COUNTY CITY MANAGEMENT ASSOCIATION, INC.

**FILED**  
**Apr 28, 2024**  
**Secretary of State**  
**8041640313CC**

**Current Principal Place of Business:**

CITY OF SOUTH BAY  
335 SW 2ND AVENUE  
SOUTH BAY, FL 33493

**Current Mailing Address:**

CITY OF SOUTH BAY  
335 SW 2ND AVENUE  
SOUTH BAY, FL 33493 US

**FEI Number:** 59-2552614

**Certificate of Status Desired:** No

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

CAMEL, LEONDRAE D  
CITY OF SOUTH BAY  
335 SW 2ND AVENUE  
SOUTH BAY, FL 33493 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:** LEONDRAE D. CAMEL

04/28/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PRESIDENT
Name	MOREE, BRIAN
Address	CITY OF ATLANTIS 260 ORANGE TREE DRIVE
City-State-Zip:	ATLANTIS FL 33462
Title	VP
Name	LUCAS, KEVIN G
Address	TOWN OF JUPITER INLET COLONY 50 COLONY RD
City-State-Zip:	JUPITER INLET COLONY FL 33469

Title	SECRETARY/TREASURER
Name	CAMEL, LEONDRAE D
Address	CITY OF SOUTH BAY 335 SW 2ND AVENUE
City-State-Zip:	SOUTH BAY FL 33493

*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:** LEONDRAE D. CAMEL

**SECRETARY**

04/28/2024

Electronic Signature of Signing Officer/Director Detail

Date