

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

DOCUMENT# N21000007150

**Entity Name:** JUST BELIEVE COMMUNITY FOUNDATION INC

**Current Principal Place of Business:**

3399 PGA BOULEVARD  
SUITE 150  
PALM BEACH GARDENS, FL 33410

**Current Mailing Address:**

3399 PGA BOULEVARD  
SUITE 150  
PALM BEACH GARDENS, FL 33410 US

**FEI Number:** 87-1295648

**Certificate of Status Desired:** No

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

BRASHEAR, JENNIFER  
3399 PGA BOULEVARD  
SUITE 150  
PALM BEACH GARDENS, FL 33410 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:** JENNIFER BRASHEAR

02/12/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            BRASHEAR, JENNIFER  
Address        3399 PGA BOULEVARD  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title            VP  
Name            SOULE, MELISA  
Address        3399 PGA BOULEVARD  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title            SECRETARY  
Name            MACHADO, COLLEEN  
Address        3399 PGA BOULEVARD  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title            TREASURER  
Name            LOGAN, TIFFANY  
Address        3399 PGA BOULEVARD  
SUITE 150  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title            DIRECTOR OF EVENT PLANNING  
Name            RHINEHOLZ, KATIE  
Address        3399 PGA BOULEVARD  
SUITE 150  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title            DIRECTOR OF FUNDRAISING  
Name            CARROLL, ASHLEY  
Address        3399 PGA BOULEVARD  
SUITE 150  
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:** JENNIFER BRASHEAR

**PRESIDENT**

02/12/2024

Electronic Signature of Signing Officer/Director Detail

Date