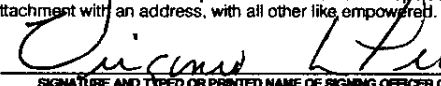


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2004 8:00 am
Secretary of State

04-15-2004 90016 003 ****70.00

DOCUMENT # 723447 1. Entity Name PALM BEACH VILLAS CONDOMINIUM, INC.					
Principal Place of Business 4201 SOUTH OCEAN BLVD. SOUTH PALM BEACH, FL 33480				Mailing Address PO BOX 7610 WEST PALM BEACH, FL 33405	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc. PO Box 3583			
City & State		City & State Lantana, FL			
Zip	Country	Zip 33465-3583	Country USA	4. FEI Number 59-1576194	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
JAY STEVEN LEVINE, ESQ. 3300 PGA BLVD., STE 500 LEVINE, FRANK & EDGAR, PA PALM BCH GARDENS, FL 33410				Name Charles M. Sutton Street Address (P.O. Box Number is Not Acceptable) 734 NE 20th Ln City Boynton Beach FL Zip Code 33435	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  4/1/04 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PIUCCI, VIRGINIO 4201 S OCEAN BLVD PALM BEACH, FL 33480	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LESH, JENNIFER 4201 S OCEAN BLVD PALM BEACH, FL 33480	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CLOSE, JAMES 4201 S OCEAN BLVD PALM BEACH, FL 33480	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D INGLIS, EILEEN 4201 S OCEAN BLVD K-8 SOUTH PALM BEACH, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FLACONE, FRANK 4201 SO. OCEAN BLVD. #H-8 S PALM BEACH, FL 33480	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FREITAG, FRAN 4201 SO. OCEAN BLVD. #M-6 S PALM BEACH, FL 33480	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  April 2, 2004 561-5330938 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					