## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#728729** 

FILED Apr 29, 2010 Secretary of State

Entity Name: THE LANDS OF THE PRESIDENT CONDOMINIUM SIX ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O ROYAL CROWN MANAGEMENT
5840 CORPORATE WAY, SUITE #107
WEST PALM BEACH, FL 33407 US

C/O BANYAN PROPERTY MGMT
2328 S CONGRESS AVE SUITE 1C
WEST PALM BEACH, FL 33406 US

Current Mailing Address: New Mailing Address:

1731 EMBASSY DR. 1823 EMBASSY DRIVE

WEST PALM BEACH, FL 33401 # 103

WEST PALM BEACH, FL 33401

FEI Number: 59-1542960 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ZERETSKY, ABRAHAM M PRESIDE MASON, YEAGER, GERSON, WHITE & LIOCE

1823 EMBASSY DR 1645 PALM BEACH LAKES

103 SUITE 1200 WEST PALM BEACH, FL 33401 US WEST PALM BEACH, FL 33401 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: MASON YEAGER GERSON WHITE LIOCE 04/29/2010

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PD

 Name:
 ZARETSKY, MAX

 Address:
 1823 EMBASSY DR #103

 City-St-Zip:
 WEST PALM BEACH, FL 33401

Title: VP

 Name:
 COOPER, JAMES

 Address:
 1723 EMBASSY DR # 102

 City-St-Zip:
 WEST PALM BEACH, FL 33401

Title: 2VP

 Name:
 MAHONEY, KATHY

 Address:
 1707 EMBASSY DR #102

 City-St-Zip:
 WEST PALM BEACH, FL 33401

Title: TD

Name: ALBRIGHT, ED

Address: 1807 EMBASSY DR # 103 City-St-Zip: WEST PALM BEACH, FL 33401

Title: SD

 Name:
 SCHACHTER, MARCIA

 Address:
 1639 EMBASSY DR #202

 City-St-Zip:
 WEST PALM BEACH, FL 33401

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: MAX ZARETSKY PD 04/29/2010