

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739314

FILED
Jan 04, 2011
Secretary of State

Entity Name: 2500 SOUTH OCEAN BOULEVARD CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2500 SOUTH OCEAN BOULEVARD
PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

2500 SOUTH OCEAN BOULEVARD
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 59-1785565

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIREKTOR, KENNETH S ESQ.
BECKER & POLIAKOFF, P.A.
625 N FLAGLER DR, 7TH FLOOR
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: VP
Name: SEGRAVES, PATRICK
Address: 2500 S. OCEAN BLVD. 1D1
City-St-Zip: PALM BEACH, FL 33480

Title: P
Name: ABRAMSON, ANDREW
Address: 2500 SOUTH OCEAN BLVD. 3C2
City-St-Zip: PALM BEACH, FL 33480

Title: D
Name: FASSLER, LEON
Address: 2500 S OCEAN BLVD 2D5
City-St-Zip: PALM BEACH, FL 33480

Title: T
Name: MECKLER, PETER
Address: 2500 SOUTH OCEAN BLVD. 1D5
City-St-Zip: PALM BCH, FL 33480

Title: D
Name: KATZ, STEVEN
Address: 2500 SOUTH OCEAN BLVD., 3C3
City-St-Zip: PALM BEACH, FL 33480

Title: S
Name: CHIAPPETTA, JOSEPH
Address: 2500 S. OCEAN BLVD. 3B3
City-St-Zip: PALM BEACH, FL 33480

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: ANDREW ABRAMSON

MR.

01/04/2011

Electronic Signature of Signing Officer or Director

_____ Date