

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 91081 023 ****61.25

DOCUMENT # 744595

1. Entity Name

THE THIRTY-THREE SIXTY CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**3360 S OCEAN BLVD
PALM BCH FL 33480**

Mailing Address

**3360 S OCEAN BLVD
PALM BCH FL 33480**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1910887**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**MARKELL, LAWRENCE
5355 TOWN CENTER ROAD
SUITE 801
BOCA RATON FL 33486**

7. Name and Address of New Registered Agent

Name **Gelfand & Arpe, P.A.**
Street Address (P.O. Box Number is Not Acceptable)
**One Clearlake Centre, Suite 1010
250 South Australian Avenue
West Palm Beach, FL 33401**

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 *[Signature]*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/25/03

FILE NOW: FEE IS \$61.25

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	PD ALEXANDER, ARNOLD	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	3360 S. OCEAN BLVD	
CITY-ST-ZIP	PALM BCH FL	
TITLE NAME	D SAVAGE, HOWARD	<input type="checkbox"/> Delete
STREET ADDRESS	3360 S. OCEAN BLVD	
CITY-ST-ZIP	PALM BCH FL	
TITLE NAME	SD ROMANOW, GAIL	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	3360 S OCEAN BLVD.	
CITY-ST-ZIP	PALM BEACH FL 33480	
TITLE NAME	VD GOLDBERG, LARRY	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	3360 S OCEAN BLVD	
CITY-ST-ZIP	PALM BEACH FL 33480	
TITLE NAME	TD FINE, LEO	<input type="checkbox"/> Delete
STREET ADDRESS	3360 S OCEAN BLVD	
CITY-ST-ZIP	PALM BEACH FL 33480	
TITLE NAME	D MATES, DONALD	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	3360 S OCEAN BLVD	
CITY-ST-ZIP	PALM BEACH FL 33480	

TITLE NAME	D Anderson, Judith	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	3360 S. Ocean Blvd	
CITY-ST-ZIP	Palm Beach, FL 33480	
TITLE NAME	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME	SD Greenberg, Madelyn	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	3360 S. Ocean Blvd	
CITY-ST-ZIP	Palm Beach, FL 33480	
TITLE NAME	VD Root, Paul	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	3360 S. Ocean Blvd	
CITY-ST-ZIP	Palm Beach, FL 33480	
TITLE NAME	D Cohen, Herman	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	3360 S. Ocean Blvd	
CITY-ST-ZIP	Palm Beach, FL 33480	
TITLE NAME	D Bonanno, Charles	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	3360 S. Ocean Blvd	
CITY-ST-ZIP	Palm Beach, FL 33480	

CR2E037 (10/02)

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: *[Signature]* SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Arnes 3/17/03