

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752792

FILED
Apr 02, 2012
Secretary of State

Entity Name: CANARY PALM CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O AMERICAN CONDO MGMT
615 CAPE CORAL PKWY W 103
CAPE CORAL, FL 33914 US

New Principal Place of Business:

C/O TURNKEY ASSOCIATION MANAGEMENT LLC
11595 KELLY ROAD #120-A
FORT MYERS, FL 33908 US

Current Mailing Address:

C/O AMERICAN CONDO MGMT
615 CAPE CORAL PKWY W 103
CAPE CORAL, FL 33914 US

New Mailing Address:

C/O TURNKEY ASSOCIATION MANAGEMENT LLC
11595 KELLY ROAD #120-A
FORT MYERS, FL 33908 US

FEI Number: 59-2236170

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KASE, SUSAN M
C/O AMERICAN CONDOMINIUM MANAGEMENT
615 CAPE CORAL PARKWAY, W, #103
CAPE CORAL, FL 33914 US

Name and Address of New Registered Agent:

PIERRO, ELAINE
C/O TURNKEY ASSOCIATION MANAGEMENT LLC
11595 KELLY ROAD #120-A
FORT MYERS, FL 33908 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: ELAINE PIERRO

04/02/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: SIMPSON, RON
Address: 73 KIVA PLACE
City-St-Zip: BRANCBURG, NJ 08876

Title: VPD
Name: KRAUL, TORSTEN
Address: 1426 SHELBY PARKWAY
City-St-Zip: CAPE CORAL, FL 33904

Title: STD
Name: JOHNSON, ANGELA
Address: 315 EASTERN PKWY #4B
City-St-Zip: BROOKLYN, NY 11238

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: ELAINE PIERRO

CAM

04/02/2012

Electronic Signature of Signing Officer or Director

Date