
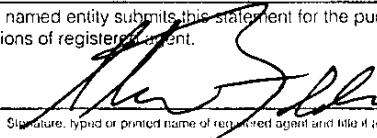


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 22, 2006 8:00 am
Secretary of State

02-22-2006 90012 034 ****61.25

DOCUMENT # 760370					
1. Entity Name 3120 CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 3120 S. OCEAN BLVD. PALM BEACH FL 33480			Mailing Address 3120 S. OCEAN BLVD. PALM BEACH FL 33480		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2256948	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Applied For		Not Applicable			
6. Name and Address of Current Registered Agent HODACH, ALICE D 3120 S OCEAN BLVD. PALM BEACH FL 33480			7. Name and Address of New Registered Agent Name FELDMAN, STEVEN Street Address (P.O. Box Number is Not Acceptable) 3120 S. OCEAN BLVD City PALM BEACH FL 33480		
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 registration.					
SIGNATURE 				DATE	
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	PD + TD <input type="checkbox"/> Delete	TITLE	PD + TD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BAUMANN, HANS	NAME	BAUMANN, HANS		
STREET ADDRESS	3120 S OCEAN BLVD	STREET ADDRESS	3120 S. OCEAN BLVD		
CITY-ST-ZIP	PALM BEACH FL 33480	CITY-ST-ZIP	PALM BEACH, FL 33480		
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	GOLDSTEIN, LEE	NAME			
STREET ADDRESS	3120 S OCEAN BLVD	STREET ADDRESS			
CITY-ST-ZIP	PALM BEACH FL 33480	CITY-ST-ZIP			
TITLE	VPD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	PARVEN, ALVIN	NAME			
STREET ADDRESS	3120 S OCEAN BLVD	STREET ADDRESS			
CITY-ST-ZIP	PALM BEACH FL 33480	CITY-ST-ZIP			
TITLE	S <input type="checkbox"/> Delete	TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SMITH, CAROL	NAME	SMITH, CAROL		
STREET ADDRESS	3120 S. OCEAN BLVD.	STREET ADDRESS	3120 E. OCEAN BLVD		
CITY-ST-ZIP	PALM BEACH FL 33480	CITY-ST-ZIP	PALM BEACH, FL 33480		
TITLE	TD <input type="checkbox"/> Delete	TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	ROSS, MARTIN	NAME	ROSS, MARTIN		
STREET ADDRESS	3120 S. OCEAN BLVD	STREET ADDRESS	3120 S. OCEAN BLVD		
CITY-ST-ZIP	PALM BEACH FL 33480	CITY-ST-ZIP	PALM BEACH, FL 33480		
TITLE	S <input type="checkbox"/> Delete	TITLE	S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	STEVE GRACE	NAME	STEVE GRACE		
STREET ADDRESS	3120 S. OCEAN BLVD	STREET ADDRESS	3120 S. OCEAN BLVD		
CITY-ST-ZIP	PALM BEACH, FL 33480	CITY-ST-ZIP	PALM BEACH, FL 33480		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:  2/19/06