

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760370

FILED  
Apr 07, 2009  
Secretary of State

Entity Name: 3120 CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

3120 S OCEAN BLVD.  
PALM BEACH, FL 33480

## New Principal Place of Business:

## Current Mailing Address:

3120 S OCEAN BLVD.  
PALM BEACH, FL 33480

## New Mailing Address:

FEI Number: 59-2256948

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WESSON, PAULA J  
3120 S OCEAN BLVD  
PALM BEACH, FL 33480 US

## Name and Address of New Registered Agent:

BUTLER, JULIAN R  
3120 S OCEAN BLVD  
PALM BEACH, FL 33480 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: JULIAN BUTLER

04/07/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: TEVEROW, JOSHUA  
Address: 3120 S OCEAN BLVD APT 1101  
City-St-Zip: PALM BEACH, FL 33480

Title: VD ( ) Delete  
Name: PARVEN, ALVIN  
Address: 3120 S OCEAN BLVD APT 2403  
City-St-Zip: PALM BEACH, FL 33480

Title: D ( ) Delete  
Name: ROSS, MARTIN  
Address: 3120 S OCEAN BLVD 2203  
City-St-Zip: PALM BEACH, FL 33480

Title: TD ( ) Delete  
Name: MATZNER, RONALD  
Address: 3120 S OCEAN BLVD APT 2102  
City-St-Zip: PALM BEACH, FL 33480

Title: SD ( ) Delete  
Name: GRACE, STEVE  
Address: 3120 S OCEAN BLVD APT 3102  
City-St-Zip: PALM BEACH, FL 33480

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: JACOBSEN, GERALD  
Address: 3120 S OCEAN BLVD 2502  
City-St-Zip: PALM BEACH, FL 33480

Title: D (X) Change ( ) Addition  
Name: MATZNER, RONALD  
Address: 3120 S OCEAN BLVD APT 2102  
City-St-Zip: PALM BEACH, FL 33480

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: STEVE GRACE

S

04/07/2009

Electronic Signature of Signing Officer or Director

Date