

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 06, 2007 08:00 A
Secretary of State

DOCUMENT # N01000000161

1. Entity Name
LONE PALM BEACH CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**1110 PINELLAS BAYWAY #207
TIERRA VERDE, FL 33715**

Mailing Address
**1110 PINELLAS BAYWAY #207
TIERRA VERDE, FL 33715**



02262007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
01-0576601

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**TIERRA VERDE PROPERTY MANAGEMENT
1110 PINELLAS BAYWAY #207
TIERRA VERDE, FL 33715**

**DO NOT WRITE
IN THIS SPACE**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME HAHN, BOB
STREET ADDRESS 1110 PINELLAS BAYWAY #207
CITY-ST-ZIP TIERRA VERDE, FL 33715

TITLE VD
NAME BERNSTEIN, BARNARD
STREET ADDRESS 1110 PINELLAS BAYWAY #207
CITY-ST-ZIP TIERRA VERDE, FL 33715

TITLE DST
NAME WARREN, ROBIN
STREET ADDRESS 1110 PINELLAS BAYWAY #207
CITY-ST-ZIP TIERRA VERDE, FL 33715

TITLE
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U00000657438
03/14/07-80067-026 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Bob Hahn **Bob Hahn, Pres**

2/23/07

Date

Daytime Phone #