2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N01000003174

T FILED

Jun 11, 2009

Secretary of State

Entity Name: THE PALMS 2100 TOWER TWO CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2110 N. OCEAN BLVD. FT. LAUDERDALE, FL 33305

Current Mailing Address: New Mailing Address:

2110 N. OCEAN BLVD. FT. LAUDERDALE, FL 33305

FEI Number: 65-1104029 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FEIN, STEVEN ESQ BLUM, KELLY ESQ

900 S. ST. RD 7 1499 WEST PALMETTO PARK RD. PLANTATION, FL 33317 US SUITE 412

BOCA RATON, FL 33486 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: KELLY BLUM, ESQUIRE 06/11/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/O

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD () Delete Title: () Change () Addition

 Name:
 KIEFER, LYNN
 Name:

 Address:
 2110 N. OCEAN BLVD. #12A
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33305
 City-St-Zip:

Title: PTD () Delete Title: () Change () Addition

 Name:
 GNATT, HOWARD
 Name:

 Address:
 2110 N. OCEAN BLVD #18A
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33305
 City-St-Zip:

Title: SD () Delete Title: () Change () Addition

 Name:
 WEISSBERGER, RONALD
 Name:

 Address:
 2110 N. OCEAN BLVD. #19A
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33305
 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: MICHAEL CAPPS CAM 06/11/2009