## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

## FILED Feb 02, 2007 08:00 All Secretary of State DOCUMENT # N03000007162 1. Entity Name 4572 PALMETTO CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 4572 PALMETTO AVENUE 4572 PALMETTO AVENUE WINTER PARK FL 32792 WINTER PARK FL 32792 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suito, Apt. #, otc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) Applied For City & Stato City & State 4. FEI Number 52-2401977 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Dosired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent VINAS, ISRAEL 4572 PALMETTO AVENUE Street Address (P.O. Box Number is Not Acceptable) WINTER PARK FL 32792 City Zip Code 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. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Due By May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11: ma PD ☐ Deiele HILL ☐ Change ☐ Addition U000000619178 NAMI VINAS, ISRAEL NAMi 02/08/07-80059-024 61.25 STREET ADDRESS STREET ADDRESS 4572 PALMETTO AVENUE CITY-St-7iP CHY-ST-ZIP WINTER PARK FL 32792 ■ AddItion HHI ☐ Delete 1010 Change NAME DEVLIN, JOE NAME STREET ADDRESS STREET ADDRESS. 3328 RAIDERS RUN CHY-ST-ZIP CHY-SI-ZIP WINTER PARK FL 32792 SILLE ☐ Delete 11111 □ Change ☐ Addition NAMI THEUNE, DANIEL J NAM STREET ADDRESS Sifu či ADiáe SS 4572 PALMETTO AVENUE CiTY+S1-7IP CHY-ST-7P WINTER PARK FL 32792 THEF ☐ Delete THE ☐ Change Addition NAMI NAMI STREET ADDRESS STREET ADDRESS CHY-\$1-7/P CHY-ST-7P HILE ☐ Defele THE Change Addition NAMI NAMI STRUET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP THE ☐ Delete HILE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST- ZIP CITY-ST-ZIP 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 eath; that I am an officer or director of the corporation or the receiver or trustop 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 alidress with all other like empowered.

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