

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 06, 2009  
Secretary of State**

DOCUMENT# N03000010189

**Entity Name:** PALM BEACH OF INDIAN SHORES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

19817 GULF BLVD  
INDIAN SHORES, FL 33785

**New Principal Place of Business:**

**Current Mailing Address:**

19534 GULF BLVD  
202  
INDIAN SHORES, FL 33785

**New Mailing Address:**

**FEI Number:** 26-0075318      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SMITH, WILLIAM F  
19534 GULF BLVD  
202  
INDIAN SHORES, FL 33785 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HAYES, LOYDD  
Address: 19817 GULF BOULEVARD # 608  
City-St-Zip: INDIAN SHORES, FL 33785

Title: VD ( ) Delete  
Name: LANGENBERG, JAMES  
Address: 19817 GULF BLVD #204  
City-St-Zip: INDIAN SHORES, FL 33785

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: GEILER, CAROL  
Address: 19817 GULF BOULEVARD # 203  
City-St-Zip: INDIAN SHORES, FL 33785

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

Title: STD ( ) Change (X) Addition  
Name: GLEESON, MICHAEL J  
Address: 19817 GULF BLVD. #503  
City-St-Zip: INDIAN SHORES, FL 33785

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: JAMES LANGENBERG

VD

04/06/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date