## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000010023

FT LAUDERDALE, FL 33303

FILED Mar 02, 2009 Secretary of State

Entity Name: THE PALMS 51 CONDOMINIUM ASSOCIATION INC.

US

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

124 NE 3RD STREET 1380 NE MIAMI GARDENS DRIVE

POMPANO BEACH, FL 33060 SUITE # 230 US

MIAMI, FL 33027

**Current Mailing Address:** New Mailing Address:

1380 NE MIAMI GARDENS DRIVE P.O. BOX 30523

**SUITE # 230** 

MIAMI, FL 33027 US

FEI Number: 20-2226571 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

FARRIS, KIP BASCOY, MARTA 124 NE 3RD STREET 1380 NE MIAMI GARDENS DRIVE

US POMPANO BEACH, FL 33060 SUITE # 230 MIAMI, FL 33027 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: MARTA BASCOY 03/02/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DST () Delete (X) Change ( ) Addition

BONABY, JOHN LOPEZ, JOFFRE Name: Name: 1851 NE 108 STREET, #A9 Address: 1851 NE 108 STREET, Address:

City-St-Zip: NORTH MIAMI BEACH, FL 33162 US City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Title: DVP () Delete Title: TREA (X) Change ( ) Addition

GOMEL, MICHAEL Name: VELASQUEZ, KENYA Name: Address: 1821 NE 168 STREET, #A5 Address: 1851 NE 168 STREET.

City-St-Zip: NORTH MIAMI BEACH, FL 33162 US City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Title: DP () Delete Title: SEC (X) Change ( ) Addition

MANTILLA, GRIKA Name: CONTRERAS, MARTHA Name: 124 NE 3RD STREET Address: Address: 1821 NE 168TH STREET City-St-Zip: POMPANO BEACH, FL 33060 US City-St-Zip: MIAMI, FL 33027 US

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: JOFFRE LOPEZ **PRES** 03/02/2009