


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 19, 2005 8:00 am
Secretary of State

05-19-2005 90045 045 ****61.25

DOCUMENT # N04257 1. Entity Name PANAMA CLUB CONDOMINIUM ASSOCIATION, INC.		
Principal Place of Business C/O RESORT MANAGEMENT 827 BALD EAGLE DRIVE MARCO ISLAND, FL 33937 US		Mailing Address POST OFFICE BOX 2244 MARCO ISLAND, FL 33969 US
2. Principal Place of Business 834 Bald Eagle Dr	3. Mailing Address PO Box 1511	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State Marco Island FL		City & State Marco Island FL
Zip 34145	Country USA	Zip 34146
Country USA		Country USA
6. Name and Address of Current Registered Agent GRUESEL, JAMIE 1104 N. COLLIER BLVD MARCO ISLAND, FL 34145		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
Make check payable to Florida Department of State		
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE PD <input type="checkbox"/> Delete NAME MURPHY, DANIEL STREET ADDRESS 910 PANAMA CRT #402 CITY-ST-ZIP MARCO ISLAND, FL 34145	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP
TITLE TD <input type="checkbox"/> Delete NAME WEGNER, MARLENE STREET ADDRESS 910 PANAMA CT #501 CITY-ST-ZIP MARCO ISLAND, FL 34145	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP
TITLE D <input type="checkbox"/> Delete NAME GEORGETTE, ULMER STREET ADDRESS 910 PANAMA CT 401 CITY-ST-ZIP MARCO ISLAND, FL 34145	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP
TITLE D <input type="checkbox"/> Delete NAME HOROWITZ, BENEDICT STREET ADDRESS 140 PRINCE ST CITY-ST-ZIP NEEDHAM, MA 02192	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP
TITLE VD <input type="checkbox"/> Delete NAME SEARLES, JIM STREET ADDRESS 910 PANAMA CT # 302 CITY-ST-ZIP MARCO ISLAND, FL 34145	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP
TITLE SD <input type="checkbox"/> Delete NAME BUDRONI, MARY STREET ADDRESS 910 PANAMA CT #202 CITY-ST-ZIP MARCO ISLAND, FL 34145	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u>Daniel J Murphy</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date: <u>04/06/05</u> <small>Date Daytime Phone #</small>