

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005704

FILED
Mar 18, 2009
Secretary of State

Entity Name: PALM ESTATES AT VERO BEACH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2240 57TH CIRCLE
VERO BEACH, FL 32966

New Principal Place of Business:

2240 57TH CIRCLE
VERO BEACH, FL 32966

Current Mailing Address:

12595 SW 137TH AVE, STE 112
MIAMI, FL 33186

New Mailing Address:

2240 57TH CIRCLE
VERO BEACH, FL 32966

FEI Number: 20-3474244

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARVEY, MARY R ESQ
1850 SW FOUNTAINVIEW BLVD
SUITE 207
PORT ST. LUCIE, FL 34986 US

Name and Address of New Registered Agent:

HARVEY, MARY R ESQ
850 NW FEDERAL HWY
SUITE 424
STUART, FL 34944 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:

03/18/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MARTINEZ, JUAN
Address: 21 SW 15TH RD
City-St-Zip: MIAMI, FL 33129

Title: VP () Delete
Name: SIBLESZ JR, ALBERTO
Address: 1000 BRICKELL AVE STE 225
City-St-Zip: MIAMI, FL 33131

Title: ST () Delete
Name: FUSTE, MARIETTA
Address: 7730 SW 70TH ST
City-St-Zip: MIAMI, FL 33143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: () Change () Addition
Name:
Address:
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: JIM WALSH

ACTT

03/18/2009

Electronic Signature of Signing Officer or Director

Date