2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2009
Secretary of State

DOCUMENT# N06976

Entity Name: THE ENCLAVE OF PALM BEACH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3170 SOUTH OCEAN BLVD.
PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

3170 SOUTH OCEAN BLVD.
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 59-2495222 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PARKER, BILLY L
3170 S. OCEAN BLVD.
OFFICE
PALM BEACH, FL 33480 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:	D	( ) Delete
Name:	NILOFF, PAUL DR.	
Address:	3170 S OCEAN BLVD APT N406	
City-St-Zip:	PALM BEACH, FL 33480	
Title:	D	( ) Delete
Name:	BOTVIN, BURTON	
Address:	3170 S OCEAN BLVD APT N401	
City-St-Zip:	PALM BEACH, FL 33480	
Title:	S	( ) Delete
Name:	SHAPIRO, NORMA	
Address:	3170 S OCEAN BLVD APT N601	
City-St-Zip:	PALM BEACH, FL 33480	
Title:	P	( ) Delete
Name:	LAMPERT, ALAN	
Address:	3170 S OCEAN BLVD APT S605	
City-St-Zip:	PALM BEACH, FL 33480	
Title:	VP	( ) Delete
Name:	MONTE, HAYMON	
Address:	3170 S OCEAN BLVD APT N606	
City-St-Zip:	PALM BEACH, FL 33480	
Title:	T	( ) Delete
Name:	COOK, J MICHAEL	
Address:	3170 S. OCEAN BLVD APT S503	
City-St-Zip:	PALM BEACH, FL 33480	

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:	
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: ALAN LAMPERT PRES 01/22/2009
Electronic Signature of Signing Officer or Director — Date