

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18709

FILED  
Apr 06, 2011  
Secretary of State

**Entity Name:** CAMDEN E CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O EDMUND COLWELL  
99 CAMDEN E  
WEST PALM BEACH, FL 33417 US

**New Principal Place of Business:**

114 CAMDEN E  
WEST PALM BEACH, FL 33417 US

**Current Mailing Address:**

CAMDEN E C/O SEACREST SERVICES INC  
2400 CENTREPARK W DR #175  
WEST PALM BEACH, FL 33409 US

**New Mailing Address:**

**FEI Number:** 59-1635364      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

COLWELL, EDMUND  
99 CAMDEN E  
WEST PALM BEACH, FL 33417 US

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

DOW, BARBARA  
114 CAMDEN E  
WEST PALM BEACH, FL 33417 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: BARBARA DOW

04/06/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: DOW, BARBARA  
Address: 114 CAMDEN E  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: VP  
Name: CAHILL, DON  
Address: 96 CAMDEN E  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: T  
Name: WOODS, BEA  
Address: 104 CAMDEN E  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: S  
Name: SINICROPI, MARY ANN  
Address: 93 CAMDEN E  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: D  
Name: SCHIFFMAN, NETTIE  
Address: 113 CAMDEN E  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: D  
Name: LAROCCA, GEORGE  
Address: 112 CAMDEN E  
City-St-Zip: WEST PALM BEACH, FL 33417 US

I hereby 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 all other like empowered.

SIGNATURE: GALE CORONA

MGRM

04/06/2011

Electronic Signature of Signing Officer or Director

Date