


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2005 8:00 am
Secretary of State

04-22-2005 90290 026 ****61.25

DOCUMENT # N9500000712

1. Entity Name
 PALM ISLES WEST ASSOCIATION, INC.



Principal Place of Business
 PRIME MANAGEMENT GROUP
 6300 APK OF COMMERCE BLVD.
 BOCA RATON, FL 33487

Mailing Address
 PRIME MANAGEMENT GROUP
 6300 APK OF COMMERCE BLVD.
 BOCA RATON, FL 33487

20042275



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

03292005 Chg-NP CR2E037 (10/03)

City & State

4. FEI Number
 65-0615764

Applied For
 Not Applicable

Zip Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 SWATT, MYRONN
 PRIME MANAGEMENT GROUP
 6300 PRK OF COMMERCE BLVD
 BOCA RATON, FL 33487

7. Name and Address of New Registered Agent
 Name: DONALD MYLAN
 Street Address (P.O. Box Number is Not Acceptable): 9815 ARBORVIEW DR S
 City: BOYNTON BEACH FL Zip Code: 33437

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: *Donald Mylan* DATE: 4-15-05
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. \$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 NAME STREET ADDRESS CITY-ST-ZIP	PD MYLAN, DONALD 9815 ARBORVIEW DR SOUTH BOYNTON BEACH, FL 33437 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DONALD MYLAN 9815 ARBORVIEW DR S BOYNTON BEACH FL 33437 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PARKER, GERALD 9572 CRESCENT VIEW DR NORTH BOYNTON BEACH, FL 33437 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ROSEN, EDWARD 4519 CRESCENTVIEW DR BOYNTON BEACH, FL 33437 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DUNN, IRVING 9831 CRESCENT VIEW DR. SOUTH BOYNTON BEACH, FL 33437 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEIBOWITZ, BERNARD 9569 ARBORVIEW DR BOYNTON BEACH, FL 33437 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KROST, FRANK 9673 ARBOR VIEW DR. N BOYNTON BEACH, FL 33437 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ROBERTS, MARILYN 9856 CRESCENTVIEW DR. SOUTH BOYNTON BEACH, FL 33437 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CANDIOTTI, MAX 9767 CRESCENT VEW DR SOUTH BOYNTON BEACH, FL 33437 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Irving Dunn* DATE: 4/15/05
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR