


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2006 8:00 am
Secretary of State

02-02-2006 90047 008 ****61.25

DOCUMENT # 754393

1. Entity Name
THE 2100 CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**2100 S. OCEAN BLVD.
 PALM BEACH, FL 33480**

Mailing Address
**2100 S. OCEAN BLVD.
 PALM BEACH, FL 33480**

60010819



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

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

01112006 Chg-NP CR2E037 (11/05)

City & State
 Zip Country

4. FEI Number
59-2027931

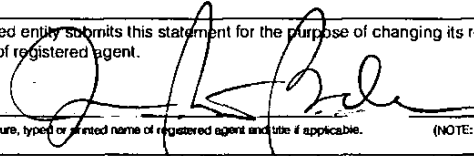
Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
**MAHNKEN, GEORGE F
 C/O THE 2100 CONDOMINIUM ASSOCIATION, INC.
 2100 S. OCEAN BLVD.
 PALM BEACH, FL 33480**

7. Name and Address of New Registered Agent
 Name **Jayne Register Barkdull, Esquire**
 Street Address (P.O. Box Number is Not Acceptable)
Levy Kneen, P.L.L.C.
1601 Forum Place, Suite 300
 City **West Palm Beach** FL Zip Code **33401**

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  (NOTE: Registered Agent signature required when reinstating)

DATE **1/24/06**

Filing Fee is **\$61.25**
 Due by **May 1, 2006**

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

TITLE	D	<input type="checkbox"/> Delete
NAME	GREENBERG, GEORGE	
STREET ADDRESS	2100 S. OCEAN BLVD.	
CITY-ST-ZIP	PALM BEACH, FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	BARON, LEONARD	
STREET ADDRESS	2100 S. OCEAN BLVD.	
CITY-ST-ZIP	PALM BEACH, FL	
TITLE	P	<input type="checkbox"/> Delete
NAME	MANNING, MERVYN H	
STREET ADDRESS	2100 S. OCEAN BLVD.	
CITY-ST-ZIP	PALM BEACH, FL 33480	
TITLE	VP	<input type="checkbox"/> Delete
NAME	LEHMAN, JOSEPH	
STREET ADDRESS	2100 S. OCEAN BLVD.	
CITY-ST-ZIP	PALM BEACH, FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	MENOWITZ, FRED	
STREET ADDRESS	2100 S. OCEAN BLVD.	
CITY-ST-ZIP	PALM BEACH, FL	
TITLE	T	<input type="checkbox"/> Delete
NAME	ALPERIN, MELVIN	
STREET ADDRESS	2100 S. OCEAN BLVD.	
CITY-ST-ZIP	PALM BEACH, FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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	<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	<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 exemptions contained 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 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  **MERVYN H. MANNING** 1-30-06 561-588-0242

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #