

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008539

FILED
Mar 04, 2009
Secretary of State

Entity Name: PALMA AT MIZNER COUNTRY CLUB NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

16102 MIZNER CLUB DRIVE
DELRAY BEACH, FL 33446

New Principal Place of Business:

Current Mailing Address:

16102 MIZNER CLUB DR.
DELRAY BEACH, FL 33446

New Mailing Address:

16102 MIZNER CLUB DRIVE
DELRAY BEACH, FL 33446

FEI Number: 26-0027239

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPBELL PROPERTY MANAGEMENT
1215 E HILLSBORO BLVD
DEERFIELD BEACH, FL 33441 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: P () Delete
Name: GRANOFSKY, JACK
Address: 16102 MIZNER CLUB DR
City-St-Zip: DELRAY BEACH, FL 33446

Title: S () Delete
Name: DAVIS, BECKY
Address: 16102 MIZNER CLUB DR
City-St-Zip: DELRAY BEACH, FL 33446

Title: D () Delete
Name: LAFFER, FERNE
Address: 16102 MIZNER CLUB DR
City-St-Zip: DELRAY BEACH, FL 33446

Title: D () Delete
Name: FRIEDMAN, HOPE
Address: 16102 MIZNER CLUB DR
City-St-Zip: DELRAY BEACH, FL 33446

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:

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: JACK GRANOFSKY

PRES

03/04/2009

Electronic Signature of Signing Officer or Director

Date