

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003938

FILED
Apr 16, 2009
Secretary of State

Entity Name: FLAGLER POINTE CONDOMINIUM ASSOCIATION OF WPB, INC.

Current Principal Place of Business:

1801 N. FLAGLER DR.
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

1801 N. FLAGLER DR.
WEST PALM BEACH, FL 33407

New Mailing Address:

FEI Number: 02-0694238

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ST. JOHN, CORE & LEMME, P.A.
1601 FORUM PLACE
SUITE 701
WEST PALM BEACH, FL 33401 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: SOFIA, THEODORE
Address: 1801 N FLAGLER DR # 739
City-St-Zip: WEST PALM BEACH, FL 33407

Title: VPD () Delete
Name: SCARFIA, MICHAEL
Address: 5 DEWEY AVENUE
City-St-Zip: STATEN ISLAND NEW YORK, NY 10308

Title: PD () Delete
Name: HERMES, JOSEPH
Address: 1801 N FLAGLER DR # 109
City-St-Zip: WEST PALM BEACH, FL 33407

Title: TSD () Delete
Name: CONNOLLY, RICHARD
Address: 16 E. VALLEY CREEK DR.
City-St-Zip: PLYMOUTH MEETING, PA 19462

Title: D (X) Delete
Name: HOLTZBERG, JOSEPH
Address: 1801 N. FLAGLER DR. #540
City-St-Zip: WEST PALM BEACH, FL 33407

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HERMES, JOSEPH
Address: 1801 N FLAGLER DR # 109
City-St-Zip: WEST PALM BEACH, FL 33407

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TSD (X) Change () Addition
Name: CONNOLLY, RICHARD
Address: 16 E. VALLEY CREEK DR.
City-St-Zip: PLYMOUTH MEETING, PA 19462

Title: D (X) Change () Addition
Name: HOLTZBERG, JOSEPH
Address: 1801 N FLAGLER DR # 540
City-St-Zip: WEST PALM BEACH, FL 33407

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: JOSEPH HERMES

PD

04/16/2009

Electronic Signature of Signing Officer or Director

Date