

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 19, 2009
Secretary of State

DOCUMENT# 709774

Entity Name: PALM BAY CONDOMINIUM, INC.**Current Principal Place of Business:**770 N.E. 69TH STREET
MIAMI, FL 33138 US**New Principal Place of Business:****Current Mailing Address:**770 N.E. 69TH STREET
MIAMI, FL 33138 US**New Mailing Address:****FEI Number:** 59-1112308**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BAKALAR & EICHNER
150 S. PINE ISLAND RD.
SUITE 540
PLANTATION, FL 33324 US**Name and Address of New Registered Agent:**HYMAN SPECTOR & MARS LLP
150 WEST FLAGLER STREET
TWENTY-SEVENTH FLOOR
MIAMI, FL 33130 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: MICHAEL HYMAN

06/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GANATRA, GIGI
Address: 770 N.E. 69TH STREET, # 6I
City-St-Zip: MIAMI, FL 33138 US

Title: P () Delete
Name: SHEILA, KINSER
Address: 770 N.E. 69TH STREET, # 1G1H
City-St-Zip: MIAMI, FL 33138 US

Title: D () Delete
Name: DUFOUR, RICK
Address: 770 NE 69TH ST #3E
City-St-Zip: MIAMI, FL 33138 US

Title: T VP () Delete
Name: LOVELAND, KATHERINE
Address: 770 NE 69TH ST #2H
City-St-Zip: MIAMI, FL 33138 US

Title: S () Delete
Name: MOSHOLDER, CORINA
Address: 770 N.E. 69TH STREET 8B
City-St-Zip: MIAMI, FL 33138

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:

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: KATHERINE LOVELAND

VP

06/19/2009

Electronic Signature of Signing Officer or Director

Date