2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723452

FILED Jan 05, 2012 Secretary of State

Entity Name: PALMSEA CONDOMINIUM, INC.

Current Principal Place of Business: New Principal Place of Business:

3520 S OCEAN BLVD 3520 S OCEAN BLVD

SOUTH PALM BEACH, FL 33480 SOUTH PALM BEACH, FL 33480 US

Current Mailing Address: New Mailing Address:

3520 S OCEAN BLVD 3520 S OCEAN BLVD

SOUTH PALM BEACH, FL 33480 SOUTH PALM BEACH, FL 33480 US

FEI Number: 59-1513096 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WHITEHURST, STEVEN MANAGER
3520 S OCEAN BLVD

VAKNINE, ELAN MANAGER
3520 S OCEAN BLVD

SOUTH PALM BEACH, FL 33480 US SOUTH PALM BEACH, FL 33480 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: ELAN VAKNINE 01/05/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

 Name:
 SAKS, ED PRESIDE

 Address:
 3520 S OCEAN BLVD F106

 City-St-Zip:
 S PALM BEACH, FL 33480

Title: VD

Name: HARVEY, BROWN VICE PR Address: 3520 S OCEAN BLVD L-604 City-St-Zip: S PALM BEACH, FL 33480

Title: SD

 Name:
 JOYCE, SULLIVAN SECRETA

 Address:
 3520 S OCEAN BLVD L-602

 City-St-Zip:
 SOUTH PALM BEACH, FL 33480

Title: TD

Name: CALABRESE, RICHARD TREASUR Address: 3520 S OCEAN BLVD H-202 City-St-Zip: SOUTH PALM BEACH, FL 33480

Title:

 Name:
 MERBLER, BRIAN DIRECTO

 Address:
 3520 S OCEAN BLVD H-305

 City-St-Zip:
 S PALM BCH, FL 33480

Title: [

 Name:
 JENSEN, ROBYN DIRECTO

 Address:
 3520 S OCEAN BLVD A-503

 City-St-Zip:
 S PALM BCH, FL 33480

I hereby 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 all other like empowered.

SIGNATURE: ELAN VAKNINE RA 01/05/2012