

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 722115

**FILED**  
**Jan 20, 2016**  
**Secretary of State**  
**CC5112172777**

**Entity Name:** TRIANON CONDOMINIUM APARTMENTS ASSOCIATION, INC.

**Current Principal Place of Business:**

1200 SOUTH FLAGLER DRIVE  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

1200 SOUTH FLAGLER DRIVE  
WEST PALM BEACH, FL 33401

**FEI Number:** 59-1500005

**Certificate of Status Desired:** No

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

ROSSIN, ALLEN E ESQ.  
1200 S FLAGLER DRIVE  
WEST PALM BEACH, FL 33401 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:** ALLEN E. ROSSIN

01/20/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name HARDER, TORRENCE  
Address 1200 SOUTH FLAGLER DRIVE  
City-State-Zip: WEST PALM BEACH FL 33401

Title VP  
Name WILLIAMS, SCOTT  
Address 1200 SOUTH FLAGLER DRIVE  
City-State-Zip: WEST PALM BEACH FL 33401

Title T  
Name HOGAN, LESLEY  
Address 1200 SOUTH FLAGLER DRIVE  
City-State-Zip: WEST PALM BEACH FL 33401

Title ASST. SECRETARY  
Name SHOBER, WHARTON  
Address 1200 SOUTH FLAGLER DRIVE  
City-State-Zip: WEST PALM BEACH FL 33401

Title SECRETARY  
Name BENNISON, JOHN  
Address 1200 SOUTH FLAGLER DRIVE  
City-State-Zip: WEST PALM BEACH FL 33401

*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:** TORRENCE HARDER

**PRESIDENT**

01/20/2016

Electronic Signature of Signing Officer/Director Detail

Date