

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 722118

**Entity Name:** PALM SQUARE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

35 SE 7TH AVENUE  
UNIT 8  
DELRAY BEACH, FL 33483

**Current Mailing Address:**

35 SE 7TH AVENUE  
UNIT 8  
DELRAY BEACH, FL 33483 US

**FEI Number:** 59-1713319

**Certificate of Status Desired:** No

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

ANDREWS, TOM  
35 SE 7TH AVENUE  
UNIT 8  
DELRAY BEACH, FL 33483 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:** TOM ANDREWS

02/12/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name LOPILATO, MARK  
Address 35 S..E 7TH AVE, #2  
City-State-Zip: DELRAY BEACH FL 33483

Title SD  
Name SETA, NICK  
Address 35 SE 7 AVE #1  
City-State-Zip: DELRAY BEACH FL 33483

Title TD  
Name ANDREWS, TOM  
Address 35 S.E. 7TH AVENUE, A-8  
City-State-Zip: DELRAY BEACH FL 33483

Title D, VP  
Name KATSOUNAKIS, LISA  
Address PO BOX 1033  
City-State-Zip: OAK BLUFFS MA 02557

*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:** TOM ANDREWS

TD

02/12/2021

Electronic Signature of Signing Officer/Director Detail

Date