

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 753350

**Entity Name:** PALMA DEL MAR CONDOMINIUM ASSOCIATION NO. 5 OF ST PETERSBURG, INC.**FILED**  
**Apr 18, 2014**  
**Secretary of State**  
**CC9825567421****Current Principal Place of Business:**CONDOMINIUM ASSOCIATES  
3001 EXECUTIVE DRIVE 260  
CLEARWATER, FL 33762**Current Mailing Address:**CONDOMINIUM ASSOCIATES  
3001 EXECUTIVE DRIVE 260  
CLEARWATER, FL 33762 US**FEI Number: 59-2133547****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LANG AND BROWN, PA  
LANG AND BROWN  
5001 FOURTH STREET NORTH SUITE A  
ST. PETERSBURG , FL 33703 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: SHAWN BROWN****04/18/2014**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :****Title** PRES  
**Name** PREUETT, TOM  
**Address** 3001 EXECUTIVE DRIVE  
260  
**City-State-Zip:** CLEARWATER FL 33762**Title** SECRETARY  
**Name** KEEFE, JACK  
**Address** 3001 EXECUTIVE DRIVE  
260  
**City-State-Zip:** CLEARWATER FL 33762**Title** D  
**Name** DINGAVAN, SOPHIE  
**Address** 3001 EXECUTIVE DRIVE  
260  
**City-State-Zip:** CLEARWATER FL 33762**Title** VP  
**Name** KAY, ROBERT  
**Address** 3001 EXECUTIVE DRIVE  
260  
**City-State-Zip:** CLEARWATER FL 33762**Title** DIRECTOR  
**Name** SISWICK, DALE  
**Address** 3001 EXECUTIVE DRIVE  
260  
**City-State-Zip:** CLEARWATER FL 33762**Title** D  
**Name** MALMBERG, DAVE  
**Address** 3001 EXECUTIVE DRIVE  
260  
**City-State-Zip:** CLEARWATER FL 33762**Title** TREASURER  
**Name** TULLY, TIM  
**Address** 3001 EXECUTIVE DRIVE  
260  
**City-State-Zip:** CLEARWATER FL 33762

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: PREUETT , TOM****PRESIDENT****04/18/2014**

Electronic Signature of Signing Officer/Director Detail

Date