2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761846

Entity Name: PALM PLACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

PROPER MGMT 2131 NE 30TH ST POMPANO BCH, FL 33064

Current Mailing Address:

P.O. BOX 50364 POMPANO BEACH, FL 33074 US

FEI Number: NOT APPLICABLE

Name and Address of Current Registered Agent:

PROPER MANAGEMENT 2131 NE 30TH ST POMPANO BEACH, FL 33064 US FILED Feb 01, 2014 Secretary of State CC8599133220

Date

Certificate of Status Desired: No

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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Officer/Dire	ctor Detail :		
Title	PRES	Title	VP
Name	PEREZ, MARIO	Name	DARDUINI, MARIBEL
Address	PO BOX 50364	Address	PO BOX 50364
City-State-Zip:	POMPANO BEACH FL 33074	City-State-Zip:	POMPANO BEACH FL 33074
Title	TD	Title	D
Name	ZAHER, JOSEPH	Name	GHANI, FEZ
Address	PO BOX 50364	Address	PO BOX 50364
City-State-Zip:	POMPANO BEACH FL 33074	City-State-Zip:	POMPANO BEACH FL 33074
Title	D	Title	D
Title Name	D FERNANDEZ, MARY	Title Name	D CHANG, WALTER
	-		-
Name	FERNANDEZ, MARY	Name	CHANG, WALTER
Name Address	FERNANDEZ, MARY PO BOX 50364	Name Address	CHANG, WALTER PO BOX 50364
Name Address City-State-Zip:	FERNANDEZ, MARY PO BOX 50364 POMPANO BEACH FL 33074	Name Address City-State-Zip:	CHANG, WALTER PO BOX 50364 POMPANO BEACH FL 33074
Name Address City-State-Zip: Title	FERNANDEZ, MARY PO BOX 50364 POMPANO BEACH FL 33074 DIRECTOR	Name Address City-State-Zip: Title	CHANG, WALTER PO BOX 50364 POMPANO BEACH FL 33074 DIRECTOR

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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:	JOSE	PH Z	ZAHE	R					TREASU	RER		02/01/2	2014
				(0)	0.00	(-					_	

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	BRAVO, JUANA
Address	P.O. BOX 50364
City-State-Zip:	POMPANO BEACH FL 33074