| FEI Number: 20-1961423<br>Name and Address of Current Registered Agent:  |  |                 | Certificate of Status Desired: No |            |
|--|--|-----------------|-----------------------------------|------------|
| ZELMER, DIANE J<br>BERENSON LLP<br>4495 MILITARY TRAIL SUITE 203<br>JUPITER, FL 33458 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  | : DIANE ZELMER                           |                 |                                   | 01/26/2024 |
|  | Electronic Signature of Registered Agent |                 |                                   | Date       |
| Officer/Director Detail :  |  |                 |                                   |            |
| Title  | PRESIDENT, DIRECTOR                      | Title           | TREASURER, DIRECTOR               |            |
| Name   | BOISVERT, SUZANN                         | Name            | GOVEIA, GUY                       |            |
| Address  | 14275 SW 142 AVE                         | Address         | 14275 SW 142 AVE                  |            |
| City-State-Zip:  | MIAMI FL 33186                           | City-State-Zip: | MIAMI FL 33186                    |            |
| Title  | SECRETARY, DIRECTOR                      |                 |                                   |            |
| Name   | GOVEIA, DANIELLE                         |                 |                                   |            |
| Address  | 14275 SW 142 AVE                         |                 |                                   |            |
| City-State-Zip:  | MIAMI FL 33186                           |                 |                                   |            |

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: SUZANN BOISVERT

Electronic Signature of Signing Officer/Director Detail

#### FILED Jan 26, 2024 **Secretary of State** 6230608127CC

## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N04000003687

Entity Name: PALM COVE CONDOMINIUM ASSOCIATION, INC.

### **Current Principal Place of Business:**

14275 SW 142 AVE MIAMI, FL 33186

### **Current Mailing Address:**

14275 SW 142 AVE MIAMI, FL 33186 US

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