

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001148

Entity Name: THE PHIPPS ESTATES HOMEOWNER'S ASSOCIATION, INC.**Current Principal Place of Business:**202 PHIPPS ESTATES RD
PALM BEACH, FL 33480**Current Mailing Address:**C/O LIST COMPANIES, 340 ROYAL POINCIANA WA
#317, PMB 378
PALM BEACH, FL 33480**FEI Number:** 65-0684355**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LIST, MARTIN A
C/O LIST COMPANIES, 340 ROYAL POINCIANA WA
#317, PMB 378
PALM BEACH, FL 33480 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PRESIDENT
Name	GOLDMAN, MARK
Address	242 VIA LAS BRISAS
City-State-Zip:	PALM BEACH FL 33480

Title	D
Name	PIZZAGALLI, JAMES
Address	210 VIA TORTUGA
City-State-Zip:	PALM BEACH FL 33480

Title	VICE, VP
Name	BURNS, BRIAN
Address	217 VIA TORTUGA
City-State-Zip:	PALM BEACH FL 33480

Title	SECRETARY
Name	LIST, MARTIN
Address	2425 EMBASSY DRIVE
City-State-Zip:	WEST PALM BEACH FL 33401

Title	TREASURER
Name	PORRECO, LOUIS
Address	PO BOX 3086
City-State-Zip:	ERIE PA 16508

Title	DIRECTOR
Name	BRIM, JOHN
Address	120 EAST END AVE. 5A
City-State-Zip:	NEW YORK NY 10028

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: MARTIN LIST**SECRETARY****02/28/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date