

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711050

FILED
Mar 19, 2009
Secretary of State

Entity Name: PALM BEACH WHITE HOUSE ASSOCIATION NO.3, INC. (A CONDOMINIUM)

Current Principal Place of Business:

ASSOCIATED PROPERTY MGMT.
1928 LAKE WORTH RD.
LAKE WORTH, FL 33461

New Principal Place of Business:

Current Mailing Address:

ASSOCIATED PROPERTY MGMT.
1928 LAKE WORTH RD.
LAKE WORTH, FL 33461

New Mailing Address:

FEI Number: 59-1980642

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DICKER, EDWARD
1818 AUSTRALIAN AVE S
STE 400
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CUYAR, ROBERT
Address: 4 LOGGERHEAD LN
City-St-Zip: MANALAPAN, FL 33462

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SMITH, LESLIE P
Address: 347 PURITAN RD.
City-St-Zip: WEST PALM BEACH, FL 33462

Title: V () Change (X) Addition
Name: CUYAR, ROBERT V
Address: 4 LOGGERHEAD LANE
City-St-Zip: MANALAPAN, FL 33462

Title: S () Change (X) Addition
Name: HELLAWELL, RAYMOND J S
Address: 6947 CYPRESS COVE CIRCLE
City-St-Zip: JUPITER, FL 33458

Title: T () Change (X) Addition
Name: GANDARILLA, JOSE T
Address: 19856 DINER KEY DR
City-St-Zip: BOCA RATON, FL 33498

Title: D () Change (X) Addition
Name: HELLAWELL, RICHARD D
Address: 2565 SO OCEAN BLVD. #114
City-St-Zip: PALM BEACH, FL 33480

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN MATH, APM

AGT

03/19/2009

Electronic Signature of Signing Officer or Director

Date