

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716085

FILED
Apr 07, 2009
Secretary of State

Entity Name: SOUTH PALM BEACH CONDOMINIUM, VILLAS, INC.

Current Principal Place of Business:

C/O CMC MANAGEMENT, INC
2950 JOY RD
GREENACRES, FL 33467

New Principal Place of Business:

C/O CMC MANAGEMENT, INC
2950 JOG RD
GREENACRES, FL 33467

Current Mailing Address:

C/O CMC MANAGEMENT, INC
2950 JOY RD
GREENACRES, FL 33467 US

New Mailing Address:

C/O CMC MANAGEMENT, INC
2950 JOG RD
GREENACRES, FL 33467 US

FEI Number: 59-1278917

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DICKER, KRIVOK & STOLOFF, P.A.
1818 AUSTRALIAN AVE SOUTH
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: P () Delete
Name: POCCIA, NICHOLAS A
Address: 4501 S OCEAN BLVD. #D-5
City-St-Zip: S PALM BEACH, FL 33480

Title: D () Delete
Name: SMITH, CHRISTOPHER
Address: 4501 SOUTH OCEAN BLVD #D2
City-St-Zip: SOUTH PALM BEACH, FL 33480

Title: S () Delete
Name: KARAGIANIS, KAY
Address: 4501 SOUTH OCEAN D-8
City-St-Zip: SOUTH PALM BEACH, FL 33480

Title: VP () Delete
Name: MOLINARIO, FRANK
Address: 4501 SOUTH OCEAN BLVD. #F-1
City-St-Zip: SOUTH PALM BEACH, FL 33480

Title: D () Delete
Name: MOLINARIO, LETICIA
Address: 4501 SOUTH OCEAN BLVD #F 1
City-St-Zip: SOUTH PALM BEACH, FL 33480

Title: T () Delete
Name: KENNY, PAM
Address: 4501 S OCEAN BLVDA-8
City-St-Zip: PALM BEACH, FL 33480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MARTIN, PAUL
Address: 4501 S OCEAN BLVD. #D-1
City-St-Zip: S PALM BEACH, FL 33480

Title: T (X) Change () Addition
Name: SMITH, CHRISTOPHER
Address: 503 SOUTH BROADWAY
City-St-Zip: LANTANA, FL 33462

Title: S (X) Change () Addition
Name: CACIOPOLI, MICHAEL
Address: 4501 SOUTH OCEAN G-5
City-St-Zip: SOUTH PALM BEACH, FL 33480

Title: VP (X) Change () Addition
Name: PENNIE, NORMA
Address: 4501 SOUTH OCEAN BLVD. G-4
City-St-Zip: SOUTH PALM BEACH, FL 33480

Title: D (X) Change () Addition
Name: KNIGHT, JANE
Address: 4501 SOUTH OCEAN BLVD G-8
City-St-Zip: SOUTH PALM BEACH, FL 33480

Title: D (X) Change () Addition
Name: HAINES, WALLY
Address: 4501 S OCEAN BLVD A-1
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: CHRISTOPHER SMITH

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04/07/2009

Electronic Signature of Signing Officer or Director

Date