

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723355

FILED  
Apr 19, 2012  
Secretary of State

**Entity Name:** THE SILVER PALM CONDOMINIUM ASSOCIATION, INC

**Current Principal Place of Business:**

4136 TO 4162 SILVER PALM DR  
4162 SILVER PALM DR.  
VERO BEACH, FL 32963 US

**New Principal Place of Business:**

**Current Mailing Address:**

4136 TO 4162 SILVER PALM DR  
PO BOX 3803 BCH STATION  
VERO BEACH, FL 329643803 US

**New Mailing Address:**

4136 TO 4162 SILVER PALM DR  
PO BOX 643803 BCH STATION  
VERO BEACH, FL 329643803 US

**FEI Number:** 59-1510797

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LOGAN, JACQULYN C PRES.  
4162 SILVER PALM DRIVE  
VERO BEACH, FL 32963 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: S  
Name: OFFUTT, MARGARET  
Address: 4140 SILVER PALM DR  
City-St-Zip: VERO BEACH, FL 32963

Title: D  
Name: DALHOUSE, CAROL  
Address: 4138 SILVER PALM DR.  
City-St-Zip: VERO BEACH, FL

Title: PD  
Name: LOGAN, JACKIE C  
Address: 4162 SILVER PALM DR  
City-St-Zip: VERO BEACH, FL 32963

Title: TD  
Name: DENISE, METZ  
Address: 5960 37TH STREET  
City-St-Zip: VERO BEACH, FL 32966

Title: D  
Name: GORLEY, SUZANNE  
Address: 4154 SILVER PALM DR  
City-St-Zip: VERO BEACH, FL 32963

Title: VD  
Name: FINNEY, FRED  
Address: 4150 SILVER PALM DR  
City-St-Zip: VERO BEACH, FL 32963

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: JACQULYN C.LOGAN

PD

04/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date