

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724227

FILED
Apr 28, 2008
Secretary of State

Entity Name: CONTINENTAL PALACE, INC.

Current Principal Place of Business:

2199 ASTOR STREET, #601
ORANGE PARK, FL 32073

New Principal Place of Business:

Current Mailing Address:

2199 ASTOR STREET, #601
ORANGE PARK, FL 32073

New Mailing Address:

FEI Number: 59-1457306

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AKSER, MUSTAFA
2199 ASTOR ST, UNIT 402
ORANGE PARK, FL 32073 US

Name and Address of New Registered Agent:

AKSER, MICHELLE
2199 ASTOR ST, UNIT 504
ORANGE PARK, FL 32073 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: MICHELLE AKSER

04/28/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: AKSER, MUSTAFA
Address: 2199 ASTOR ST # 402
City-St-Zip: ORANGE PARK, FL 32073

Title: PD () Delete
Name: SILVERBLATT, TOM
Address: 2199 ASTOR ST. UNIT 107
City-St-Zip: ORANGE PARK, FL 32073

Title: S () Delete
Name: GRUNNINGER, TRACIE
Address: 2199 ASTOR ST. UNIT 204
City-St-Zip: ORANGE PARK, FL 32073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: AKSER, MICHELLE
Address: 2199 ASTOR ST # 504
City-St-Zip: ORANGE PARK, FL 32073

Title: PD (X) Change () Addition
Name: GRUNNINGER, TRACY
Address: 2199 ASTOR ST. UNIT 204
City-St-Zip: ORANGE PARK, FL 32073

Title: S (X) Change () Addition
Name: EVERETT, ROSE
Address: 2199 ASTOR ST. UNIT 402
City-St-Zip: ORANGE PARK, FL 32073

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: MICHELLE AKSER

T

04/28/2008

Electronic Signature of Signing Officer or Director

Date