

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741103

FILED  
Mar 01, 2012  
Secretary of State

**Entity Name:** PALM BEACH POINT PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

%THE CONTINENTAL GROUP, INC.  
3461-B FAIRLANE FARMS ROAD  
WELLINGTON, FL 33414 US

**New Principal Place of Business:**

**Current Mailing Address:**

%THE CONTINENTAL GROUP, INC.  
3461-B FAIRLANE FARMS ROAD  
WELLINGTON, FL 33414 US

**New Mailing Address:**

**FEI Number:** 65-0201724

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HARTLEY & MORTON, ATTORNEYS AT LAW  
800 VILLAGE SQUARE CROSSING  
SUITE 222  
PALM BEACH GARDENS, FL 33414 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  
Name: LABBE, THEODORE  
Address: 14465 SUNNYLAND LANE  
City-St-Zip: WELLINGTON, FL 33414

Title: D  
Name: RAMBACH, FRANCOISE  
Address: 15292 SUNNYLAND LANE  
City-St-Zip: WELLINGTON, FL 33414

Title: T  
Name: FINSNESS, RUSSELL  
Address: 4450 PALM BEACH POINT BLVD.  
City-St-Zip: WELLINGTON, FL 33414

Title: S  
Name: BARENBURG, SHERRIE  
Address: 3055 PALM BEACH POINT BLVD.  
City-St-Zip: WELLINGTON, FL 33414

Title: D  
Name: TIMM, LISA  
Address: 15511 OCEAN BREEZE LANE  
City-St-Zip: WELLINGTON, FL 33414

Title: VP  
Name: GLAZER, SHIMON  
Address: 15635 PALMA LANE  
City-St-Zip: WELLINGTON, FL 33414

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: THEODORE LABBE

P

03/01/2012

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

\_\_\_\_\_  
Date