

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742457

FILED  
Mar 08, 2010  
Secretary of State

**Entity Name:** NORTHAMPTON O CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

300 NORTHAMPTON O  
WEST PALM BEACH, FL 33417 US

**New Principal Place of Business:**

**Current Mailing Address:**

SEACREST SERVICES INC.  
2400 CENTREPARK W DR #175  
WEST PALM BEACH, FL 33409 US

**New Mailing Address:**

NORTHAMPTON O C/O SEACREST SERVICES INC.  
2400 CENTREPARK W DR #175  
WEST PALM BEACH, FL 33409 US

FEI Number: 59-1638739

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MARSHALL, ELIZABETH  
289 NORTHAMPTON O  
WEST PALM BEACH, FL 33417 US

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

BECKER & POLIAKOFF P.A.  
ATTN MARK FRIEDMAN  
625 N FLAGLER DR 7TH FL  
WEST PALM BEACH, FL 33401 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: MARK FRIEDMAN

03/08/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CARVER, JAMES  
Address: 300 NORTHAMPTON O  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: VP  
Name: CLEM, LESLIE  
Address: 282 NORTHAMPTON O  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: T  
Name: MARSHALL, ELIZABETH  
Address: 289 NORTHAMPTON O  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: S  
Name: SAMUELLS, BARBARA  
Address: 302 NORTHAMPTON O  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: D  
Name: DENOYLLES, PHYLLIS  
Address: 283 NORTHAMPTON O  
City-St-Zip: WEST PALM BEACH, FL 33417 US

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: GALE CORONA

MS

03/08/2010

Electronic Signature of Signing Officer or Director

Date