

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742745

FILED
Apr 06, 2011
Secretary of State

Entity Name: CAMDEN N CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O EVELYN JOY VESTAL
335 CAMDEN N
WEST PALM BEACH, FL 33417 US

New Principal Place of Business:

Current Mailing Address:

CAMDEN N C/O SEACREST SERVICES INC
2400 CENTREPARK W DR STE 175
WEST PALM BEACH, FL 33409 US

New Mailing Address:

FEI Number: 59-1636141 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF P.A.
3111 STIRLING RD
FT LAUDERDALE, FL 33312 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: DIXON, ENIS
Address: 5228 TIFFANY ANNE CIR
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: VP
Name: FRIED, EVA
Address: 328 CAMDEN N
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: T
Name: KAUFMAN, SEYMOUR
Address: 319 CAMDEN N
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: D
Name: ORETI, RAYMOND
Address: 322 CAMDEN N
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: P
Name: VESTAL, EVELYN J
Address: 335 CAMDEN N
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: D
Name: CARRIER, CAMILLE
Address: 316 CAMDEN N
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

MGRM

04/06/2011

Electronic Signature of Signing Officer or Director

_____ Date