## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 742783** 

FILED Mar 12, 2010 Secretary of State

Entity Name: SALISBURY D CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

90 SALISBURY D

WEST PALM BEACH, FL 33417 US

Current Mailing Address: New Mailing Address:

SEACREST SERVICES INC
2400 CENTERPARK W DR #175
WEST PALM BEACH, FL 33409 US
SALISBURY D C/O SEACREST SERVICES INC
2400 CENTERPARK W DR #175
WEST PALM BEACH, FL 33409 US

FEI Number: 59-1730332 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

DICKER, KRIVOK & STOLOFF P.A.

1818 AUSTRALIAN AVENUE SOUTH - SUITE 400

DICKER, KRIVOK & STOLOFF P.A.

EDWARD DICKER

WEST PALM BEACH, FL 33409 US 1818 AUSTRALIAN AVENUE S SUITE 400 WEST PALM BEACH, FL 33409 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: 03/12/2010

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Γitle: ¯

Name: GAWRONIAK, ROBERT Address: 85 SALSBURY D

City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: D

Name: WEISMAN, MARTIN Address: 92 SALISBURY D

City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: VP

Name: CAGNEY, JOHN Address: 81 SALISBURY D

City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: S

Name: HOFMANN, MARJORIE Address: 84 SALISBURY D

City-St-Zip: WEST PALM BEACH, FL 33417

Title: F

Name: ZARET, MARCIA Address: 90 SALISBURY D

City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: [

Name: DAVIDSON, RALPH Address: 73 SALISBURY D

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 03/12/2010