

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743130

FILED  
Mar 08, 2010  
Secretary of State

**Entity Name:** NORWICH "F" CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

126 NORWICH F  
W PALM BEACH, FL 33417 US

**New Principal Place of Business:**

126 NORWICH F  
WEST PALM BEACH, FL 33417 US

**Current Mailing Address:**

126 NORWICH F  
W PALM BEACH, FL 33417 US

**New Mailing Address:**

126 NORWICH F  
WEST PALM BEACH, FL 33417 US

**FEI Number:** 59-1645082

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BENNETT, JAMES L  
126 NORWICH F  
W PALM BEACH, FL 33417 US

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

DICKER, KRIVOK & STOLOFF P.A.  
ATTN SCOTT STOLOFF  
1818 AUSTRALIAN AVE S  
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: SCOTT STOLOFF

03/08/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BENNETT, JAMES  
Address: 126 NORWICH F  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: VP  
Name: YOSKOWITZ, SUSAN  
Address: 133 NORWICH F  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: T  
Name: GAUM, ROSELY L  
Address: 144 NORWICH F  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: S  
Name: STARR, STEPHANIE  
Address: 140 NORWICH F  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: D  
Name: PROBEL, SHIRLEY  
Address: 130 NORWICH F  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: D  
Name: FRENCH, EARL  
Address: 132 NORWICH F  
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