

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 12, 2008 8:00 am
Secretary of State

05-12-2008 90029 049 ****61.25

DOCUMENT # 747698 1. Entity Name THE EVERGLADES OF NORTH PALM BEACH CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 372 GOLFVIEW ROAD NORTH PALM BEACH, FL 33408		Mailing Address SUNRISE COMPANIES 275 TONEY PENNA DR. #7 JUPITER, FL 33458 US	
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address 1061 E. Indiantown Rd. Suite 410 Jupiter, Fla. 33477 US	
City & State Zip Country		4. FEI Number 59-1980686	
5. Certificate of Status Desired <input type="checkbox"/>		Applied For Not Applicable	
6. Name and Address of Current Registered Agent KUNKLE, CRAIG 275 TONEY PENNA DRIVE #7 JUPITER, FL 33458		7. Name and Address of New Registered Agent Name Runkle, Craig Street Address (P.O. Box Number is Not Acceptable) 1061 E. INDIANTOWN Rd. SUITE 410 City JUPITER FL Zip Code 33477	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	
\$5.00 May Be Added to Fees		Make check payable to: Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD EVANS, DANIELA 364 GOLFVIEW RD, #506 NORTH PALM BEACH, FL 33408	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Debi Costokas 364 Golfview Road North Palm Beach, FL 33408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHELTON, FRANK 372 GOLFVIEW ROAD NORTH PALM BEACH, FL 33408	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WARNER, MARK KIRK 372 GOLFVIEW RD #C-503 NORTH PALM BEACH, FL 33408	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D-VP CAROLYNE, DUANE 364 GOLFVIEW RD #101A NORTH PALM BEACH, FL 33408	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PALLONE, GRACE 374 GOLFVIEW ROAD NORTH PALM BEACH, FL 33408	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HAYS, BAYRAE 374 GOLFVIEW RD #C-204 NORTH PALM BEACH, FL 33408	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE:		DANIELA EVANS PRESIDENT	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 2/15/08 Daytime Phone 5616248115	