## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#747698** 

FILED Feb 24, 2012 Secretary of State

Entity Name: THE EVERGLADES OF NORTH PALM BEACH CONDOMINIUM ASSOCIATION, INC.

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

1061 E. INDIANTOWN ROAD 1201 US HIGHWAY ONE

SUITE 4120 SUITE 330

JUPITER, FL 33477 NORTH PALM BEACH, FL 33408

Current Mailing Address: New Mailing Address:

1061 E INDIANTOWN RD 1201 US HIGHWAY ONE

STE 410 SUITE 330

JUPITER, FL 33477 US NORTH PALM BEACH, FL 33408

FEI Number: 59-1980686 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:

KUNKLE, CRAIG SKRLD, INC

1061 E IŃDIANTOWN RD 201 ALHAMBRA CIRCLE

STE 410 STE 1200

JUPITER, FL 33477 US CORAL GABLES, FL 33134 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: SKRLD, INC 02/24/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PD

 Name:
 SMITH, CAROL A

 Address:
 374 GOLFVIEW RD, #405

 City-St-Zip:
 NORTH PALM BEACH, FL 33408

Title: VD

Name: WARNER, KIRK Address: 372 GOLFVIEW ROAD

City-St-Zip: NORTH PALM BEACH, FL 33408

Title: TD

Name: VENEZIA, BOB

Address: 374 GOLFVIEW RD #C-306 City-St-Zip: NORTH PALM BEACH, FL 33408

Title:

Name: COSTOKAS, DEBI Address: 364 GOLFVIEW RD

City-St-Zip: NORTH PALM BEACH, FL 33408

Title: SD Name: HAYS, RAE

Address: 374 GOLFVIEW ROAD 204C City-St-Zip: NORTH PALM BEACH, FL 33408

Title: [

 Name:
 EVANS, DANIELA

 Address:
 364 GOLFVIEW RD 506A

 City-St-Zip:
 NORTH PALM BEACH, FL 33408

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: CAROL SMITH P 02/24/2012