

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 29, 2008 8:00 am
Secretary of State

02-29-2008 90018 016 ****61.25

DOCUMENT # 748678

1. Entity Name
**BREAKWATERS OF THE PALM BEACHES
CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business
**520 EXECUTIVE CENTER DRIVE
WEST PALM BEACH, FL 33401 US**

Mailing Address
**520 EXECUTIVE CENTER DRIVE
WEST PALM BEACH, FL 33401 US**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02122008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2084015

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DICKER, KRIVOK & STOLOFF, P.A.
1818 AUSTRALIAN AVE. SOUTH
SUITE 400
WEST PALM BEACH, FL 33409**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$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 PD ☐ Delete
NAME SUMMERS, WAYNE
STREET ADDRESS 2328 S. CONGRESS AVE, SUITE 2A
CITY-ST-ZIP WEST PALM BEACH, FL 33406

TITLE SD ☒ Change ☐ Addition
NAME SUMMERS, WAYNE
STREET ADDRESS 2328 S. CONGRESS AVE., SUITE 2A
CITY-ST-ZIP WEST PALM BEACH, FL 33406

TITLE SD ☐ Delete
NAME LIFTMAN, DANIEL
STREET ADDRESS 2328 S. CONGRESS AVE., SUITE 2A
CITY-ST-ZIP WEST PALM BEACH, FL 33406

TITLE VPD ☒ Change ☐ Addition
NAME LIFTMAN, DANIEL
STREET ADDRESS 2328 S. CONGRESS AVE., SUITE 2A
CITY-ST-ZIP WEST PALM BEACH, FL 33406

TITLE VPD ☐ Delete
NAME FITZGERALD, JOHN
STREET ADDRESS 2328 S. CONGRESS AVE, SUITE 2A
CITY-ST-ZIP WEST PALM BEACH, FL 33406

TITLE PD ☒ Change ☐ Addition
NAME FITZGERALD, JOHN
STREET ADDRESS 2328 S. CONGRESS AVE., SUITE 2A
CITY-ST-ZIP WEST PALM BEACH, FL 33406

TITLE TD ☒ Delete
NAME NAPOLITANO, TONY
STREET ADDRESS 2328 S. CONGRESS AVE, SUITE 2A
CITY-ST-ZIP WEST PALM BEACH, FL 33406

TITLE TD ☐ Change ☒ Addition
NAME EANES, RICHARD
STREET ADDRESS 2328 S. CONGRESS AVE., SUITE 2A
CITY-ST-ZIP WEST PALM BEACH, FL 33406

TITLE D ☐ Delete
NAME KLEIN, MARIE
STREET ADDRESS 2328 S. CONGRESS AVE., SUITE 2A
CITY-ST-ZIP WEST PALM BEACH, FL 33406

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: Wayne L Summers **WAYNE L SUMMERS**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/25/08

Date

Daytime Phone #