2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 02, 2005
Secretary of State

DOCUMENT# 749829

Entity Name: 1202 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1202 PALM TRAIL
UNIT #2
DELRAY BEACH, FL 33483

New Principal Place of Business:

Current Mailing Address:

1202 PALM TRAIL
UNIT #2
DELRAY BEACH, FL 33483

New Mailing Address:

FEI Number: 01-0649929 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HERMAN, BRUCE ESQ
1401 E BROWARD BLVD SUITE 206
FT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: LESLIE, PAMELA
Address: 1202 PALM TRAIL UNIT #2
City-St-Zip: DELRAY BEACH, FL 33483

Title: VP ( ) Delete
Name: HARDING, JOY
Address: 600NW 21ST STREET
City-St-Zip: WILTON MANORS, FL 33311

Title: DS ( ) Delete
Name: CARROLL, GERI E
Address: 1467 ESTUARY TRAIL
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: JENKINS, JUDY
Address: 1202 PALM TRAIL UNIT # 6
City-St-Zip: DELRAY BEACH, FL 33483

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PAMELA F LESLIE PD 08/02/2005

Electronic Signature of Signing Officer or Director — Date