

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754259

FILED  
Feb 21, 2011  
Secretary of State

**Entity Name:** PALMA CEIA PLACE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

VANGUARD MANAGEMENT GROUP, INC.  
9300 NORTH 16TH STREET  
TAMPA, FL 33612

**New Principal Place of Business:**

**Current Mailing Address:**

VANGUARD MANAGEMENT GROUP, INC.  
9300 NORTH 16TH STREET  
TAMPA, FL 33612

**New Mailing Address:**

**FEI Number:** 59-2269175

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VANGUARD MANAGEMENT GROUP, INC.  
9300 NORTH 16TH STREET  
TAMPA, FL 33612 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  
Name: MASCIANTONIO, GINO L  
Address: 9300 NORTH 16TH ST  
City-St-Zip: TAMPA, FL 33612

Title: VP  
Name: HANEY, LINDA G  
Address: 9300 NORTH 16TH ST  
City-St-Zip: TAMPA, FL 33612

Title: TS  
Name: CARDILLO, REBECCA H  
Address: 9300 NORTH 16TH ST  
City-St-Zip: TAMPA, FL 33612

Title: D  
Name: DEJONGE, NOEMI  
Address: 9300 N. 16TH ST.  
City-St-Zip: TAMPA, FL 33612

Title: D  
Name: TEAR, GREGORY  
Address: 9300 NORTH 16TH ST  
City-St-Zip: TAMPA, FL 33612

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: JANET WINFIELD

AGEN

02/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date