

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754861

FILED
Jul 11, 2007
Secretary of State

Entity Name: TWIN PALMS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

780 10TH AVENUE SOUTH, #6
NAPLES, FL 34102 US

New Principal Place of Business:

Current Mailing Address:

780 10TH AVENUE SOUTH, #6
NAPLES, FL 34102 US

New Mailing Address:

FEI Number: 59-2098434 **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:

KRAUS & BALLENGER, PA
1072 GOODLETTE ROAD
NAPLES, FL 34102 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: P () Delete
Name: LAMONT, PEG
Address: 780 10TH AVENUE SOUTH, #6
City-St-Zip: NAPLES, FL 34102 US

Title: V () Delete
Name: MANDOS, CINDEE
Address: 780 10TH AVENUE SOUTH, #4
City-St-Zip: NAPLES, FL 34102 US

Title: T (X) Delete
Name: TYNDALL, MEG
Address: 3735 CHARLES ST.
City-St-Zip: SAN DIEGO, CA 92106

Title: D () Delete
Name: MURYN, MARTHA
Address: 1804 KINGS LAKE BLVD.
City-St-Zip: NAPLES, FL 34112

Title: D () Delete
Name: SUILLIVAN, JACK
Address: 1549 SANDPIPER ST.
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: PEG LAMONT

PRES

07/11/2007

Electronic Signature of Signing Officer or Director

Date