2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754861

FILED Mar 23, 2009 Secretary of State

Entity Name: TWIN PALMS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 780 10TH AVENUE SOUTH, #6 NAPLES, FL 34102 **Current Mailing Address: New Mailing Address:** 780 10TH AVENUE SOUTH, #6 NAPLES, FL 34102 FEI Number: 59-2098434 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: KRAUS & BALLENGER, PA LAMONT, PEG 1072 GOODLETTE ROAD 780 10TH AVE. S., #6 NAPLES, FL 34102 NAPLES, FL 34102 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: PEG LAMONT 03/23/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition LAMONT, PEG Name: Name: 780 10TH AVENUE SOUTH, #6 Address: Address: City-St-Zip: NAPLES, FL 34102 US City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: MANDOS, CINDEE Name: LARSON, JAMES R Address: 780 10TH AVENUE SOUTH, #4 Address: 780 10TH AVENUE SOUTH, #24 City-St-Zip: NAPLES, FL 34102 US City-St-Zip: NAPLES, FL 34102 US Title: () Delete Title: () Change () Addition MURYN, MARTHA Name: Name: 1804 KINGS LAKE BLVD. Address: Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip: Title: () Delete Title: () Change () Addition Name: SUILLIVAN, JACK Name: 1549 SANDPIPER ST. Address: Address: City-St-Zip: NAPLES, FL 34103 City-St-Zip: Title: Title: () Delete () Change (X) Addition CARDELLO, ROBERT Name: Name: 174 S. COLLIER BLVD., UNIT 304 Address: Address: City-St-Zip: City-St-Zip: MARCO ISLAND, FL 341454301

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 Ρ 03/23/2009