2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## FILED Apr 24, 2006 08:00 AN Secretary of State **DOCUMENT # 759835** 1. Entity Name PALMETTO WEST CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 7870-7888 N.W. 64 STREET 7878 N.W. 64 ST. MIAMI FL 33166 MIAMI FL 33166 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt, #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FE! Number Applied For NO-T APPLICABLE Not Applicat Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GUARNER, PETER Street Address (P.O. Box Number is Not Acceptable) 9240 SOUTHWEST 55TH COURT COOPER CITY FL 33328 City 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 4 applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 Make Check Payable to 9., Election Campaign Financing \$5.00 May Be Trust Fund Contribution. ... Due By May 1, 2006 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. PTD ATLE Defete TITLE MILANA, SUSAN NAME NAME U000000532104 9970 S.W. 59 COURT STREET ADDRESS STREET ADDRESS 05/06/06-80073-001 61.25 COOPER CITY FL 33328 CHY-ST-ZIP CITY-ST-ZIP VD ☐ Delete ☐ Change ☐ Addition TITLE REYNES, DENIA MAME MAME 18873 NW 171 LANE STREET ANDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP CITY-ST-71P SD TITLE Delete ☐ Addition SALAZAR, FRANCISCO NAME NAME 5911 BOTTLEBRUSH DRIVE STREET ADDRESS STREET ADDRESS CiTY-ST-7IP MIAMI LAKES FL OTY ST-78 TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-DP CITY-ST-ZIP حنية والأ TITLE ☐ Defele TITLE Addition 🔲 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHTY-ST-ZIP

SIGNATURE: Susan & Milana Susan E. Milana April 20, 2006 305-592-41

if changed, or on an attachment with an address, with all other like empowered.

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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