2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2009
Secretary of State

DOCUMENT# 759835

Entity Name: PALMETTO WEST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

7870-7888 N.W. 64 STREET
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

7874 N.W. 64 ST.
MIAMI, FL 33166

New Mailing Address:

7874 N.W. 64TH. STREET
MIAMI, FL 33166

FEI Number: 59-2171783 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BIANCHI, MARIELLA
7888 N.W. 64TH. STREET
UNIT 110
MIAMI, FLORIDA, FL 331669264 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:	CASAMAYOR, CESAR	
Address:	7882/84 N.W. 64TH. STREET	
City-St-Zip:	MIAMI, FL 33166	
Title:	VPD	( ) Delete
Name:	REYNES, DENIA	
Address:	7870 N.W. 64TH. STREET	
City-St-Zip:	MIAMI, FL 33166	
Title:	TD	( ) Delete
Name:	LIPSON, ARI F.	
Address:	7874 N.W. 64TH. STREET	
City-St-Zip:	MIAMI, FL 33166	
Title:	SD	( ) Delete
Name:	SALAZAR, FRANCISCO	
Address:	7886 N.W. 64TH. STREET	
City-St-Zip:	MIAMI, FL 33166	

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:	

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: CESAR CASAMAYOR PD 01/15/2009

Electronic Signature of Signing Officer or Director — Date