2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#762215

FILED Mar 13, 2009 Secretary of State

Entity Name: PALM VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

8800 ROYAL PALM BLVD CORAL SPRINGS, FL 33065

Current Mailing Address: New Mailing Address:

8800 ROYAL PALM BLVD CORAL SPRINGS, FL 33065

FEI Number: 59-2190852 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:

ROBERT KAYE & ASSOCIATES, INC. 6261 NW 6TH WAY STE 103 FORT LAUDERDALE, FL 33309 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:

Name:

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition DELFAVRERO, DOROTHY DELFAVRERO, DOROTHY Name: 8750 ROYAL PALM BLVD #204 Address: 8750 ROYAL PALM BLVD #204

Address: City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: CORAL SPRINGS, FL 33065 Title: () Delete Title: (X) Change () Addition

HOWITH, ROBERT Name: HOWITH, ROBERT Name: Address: 8750 ROYAL PALM BLVD 113 Address: 8750 ROYAL PALM BLVD 113 City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: CORAL SPRINGS, FL 33065

VΡ Title: () Delete Title: (X) Change () Addition

SUAREZ, LOUIS SUAREZ, LOUIS Name: Name: POB 772442 Address: POB 772442

Address: City-St-Zip: POMPANO BEACH, FL 33077 City-St-Zip: POMPANO BEACH, FL 33077

Title: () Delete Title: (X) Change () Addition

Name: SUAREZ, JANER Name: SUAREZ, JAVIER 8750 ROYAL PLAM BLVD 219 8750 ROYAL PLAM BLVD 219 Address: Address: City-St-Zip: POMPANO BEACH, FL 33065 City-St-Zip: POMPANO BEACH, FL 33065

Title: () Delete Title: () Change (X) Addition

O'DEA, LOUISE Name: Name:

8800 ROYAL PALM BLVD #104 Address: Address: City-St-Zip: City-St-Zip: CORAL SPRINGS, FL 33065

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: LOUISE O'DEA Ρ 03/13/2009