

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762524

FILED  
Jan 27, 2009  
Secretary of State

Entity Name: UNIT OWNERS ASSOCIATION OF PALM GREENS, INC.

**Current Principal Place of Business:**

5801 VIA DELRAY  
DELRAY BCH, FL 33484

**New Principal Place of Business:**

**Current Mailing Address:**

5801 VIA DELRAY  
DELRAY BCH, FL 33484

**New Mailing Address:**

FEI Number: 59-2177596      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HANDELMAN, BEVERLY  
13691 A VIA AURORA  
DELRAY BEACH, FL 33484      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: ELISCU, JACK  
Address: 5791 D SPINDLE PALM CT  
City-St-Zip: DELRAY BEACH, FL 33484

Title: S      ( ) Delete  
Name: BACDON, IRENE  
Address: 13640 C COCONUT PALM CT  
City-St-Zip: DELRAY BEACH, FL 33484

Title: ST      ( ) Delete  
Name: HANDELMAN, BEVERLY,  
Address: 13691-A VIA AURORA  
City-St-Zip: DELRAY BEACH, FL

Title: V      ( ) Delete  
Name: MISIKOFF, RHODA  
Address: 5650 D SPINDLE PALM CT  
City-St-Zip: DELRAY BEACH, FL 33484

Title: D      ( ) Delete  
Name: AUSPITZ, JOSEPH  
Address: 13363 B PINEAPPLE PALM CT  
City-St-Zip: DELRAY BCH, FL

Title: V      ( ) Delete  
Name: GURVITZ, LEONARD  
Address: 13775 A VIA AURORA  
City-St-Zip: DELRAY BEACH, FL 33484

**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:

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: BEVERLY HANDELMAN

S

01/27/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date