2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

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Secretary of State **DOCUMENT #765457** 09-09-2005 90036 022 ****61.25 PATIO BEACH CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 303 GLEASON STREET ONE CLEARLAKE CENTER T1200UUG DELRAY BEACH, FL 33483 250 S AUSTRALIAN AVE STE 1010 WEST PALM BEACH, FL 33401 US 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 05182005 Chq-NP CR2E037 (10/03) City & State City & State 4. FEI Number 59-2374486 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **GELFAND, MICHAEL** 250 S AUSTRALIAN AVENUE, SUITE 1010 Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH, FL 33401-5014 Zip Code 6. 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 registored agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make check payable to 9. Election Campaign Financing \$5.00 May Be * Filing Fee is \$61.25 Florida Department of State Trust Fund Contribution. Due by September 7, 2005 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. PRES Change ☐ Addition ☐ Delete TILE TITLE JACK O CONNOR NAME SCHEIDER, NANCY NAME 303 GLEASON ST HD STREET ADDRESS 41 EAST ROAD STREET ADDRESS DELRAY BEACH, FL 33483 CITY-ST-ZIP DELRAY BCH, FL 33483 CITY-ST-71P V PRES ☐ Delete TITLE Change ☐ Addition TITLE VALENTINE FINE NAME MCKEOWN, HEATHER NAME STREET ADDRESS STREET ADDRESS 303 GLEASON ST. #3 303 GLEASON ST #5 DELRAY BEACH, FL 33483 CITY-ST-71P CITY-ST-ZIP DELRAY BCH, FL 33483 TITLE ☐ Delete DILE 586 Change ■ Addition NOREEN OCONHOR HECK, NANCY NAME NAME 303 GLEASON ST \$10 STREET ADORESS 1221 NW 19TH TERRACE STREET ADDRESS CITY-ST-7IP DELRAY BEACH, FL 33445 CHY-ST-78 DELPAY BCH FL 33483 ☐ Defete TITLE Change ☐ Addition TREAS O'CONNOR, JACK NAME NAME NANCY SCHNEIDER STREET ADDRESS 303 GLEASON ST. #10 STREET ADDRESS 41 EAST POAD DELRAY BEACH, FL-33483-CITY-ST-ZIP CITY-ST-ZIP FL 33483 DELRAY BCH, ☐ Delete MILE Change ☐ Addition LAFALLEE CAROLYN MAME NAME HEATHER MCKEOWN STREET ADDRESS 5185 RT 130 STREET ADDRESS 303 GLEASON ST #3 DELRAY BCH, FL 33483 CITY-ST-ZIP BORDENTOWN, NJ 08505 CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 if changed, or on an attachment with an address, with all other like empowered.

FILED

Sep 09, 2005 8:00 am