

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768096

FILED  
Apr 08, 2009  
Secretary of State

**Entity Name:** PALM GROVE GARDENS II CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

ROSSMAN REALTY PROP. MGMT  
1104 SE 46TH LANE #2  
CAPE CORAL, FL 33904

**New Principal Place of Business:**

**Current Mailing Address:**

ROSSMAN REALTY PROP. MGMT  
1104 SE 46TH LANE #2  
CAPE CORAL, FL 33904

**New Mailing Address:**

**FEI Number:** 59-2813731

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MICHELLE ROSSMAN, CAM  
ROSSMAN PROPERTY MANAGEMENT, LLC  
1104 SE 46TH LANE #2  
CAPE CORAL, FL 33904 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: STD ( ) Delete  
Name: REYNOLDS, BARBARA  
Address: 1109 SE 40TH STREET, STE 101  
City-St-Zip: CAPE CORAL, FL 33904

Title: VPD ( ) Delete  
Name: BORUSHKO, ERNEST  
Address: 427 BIDDLE AVENUE  
City-St-Zip: WYANDOTTE, MI 48192

Title: PD ( ) Delete  
Name: NORTON, ROBERT  
Address: POB 600  
City-St-Zip: MINOTOLA, NJ 08341

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: STD (X) Change ( ) Addition  
Name: NACK, LES  
Address: 8214 SIERRA WOODS COURT  
City-St-Zip: CARPENTERSVILLE, IL 60110

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: MICHELLE ROSSMAN, CAM

CAM

04/08/2009

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

\_\_\_\_\_  
Date