

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769166

FILED  
Apr 20, 2011  
Secretary of State

**Entity Name:** GRAMERCY AT POINCIANA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

PMS CORP  
3150 VIA POINCIANA  
LAKE WORTH, FL 33467 US

**New Principal Place of Business:**

ASSOCIATED PROPERTY MANAGEMENT  
1928 LAKE WORTH ROAD  
LAKE WORTH, FL 33461 US

**Current Mailing Address:**

PMS CORP  
3150 VIA POINCIANA  
LAKE WORTH, FL 33467 US

**New Mailing Address:**

ASSOCIATED PROPERTY MANAGEMENT  
1928 LAKE WORTH ROAD  
LAKE WORTH, FL 33461 US

**FEI Number:** 59-2516722

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PMS CORP  
3150 VIA POINCIANA  
LAKE WORTH, FL 33467 US

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

POSNER, MICHAEL J ESQ.  
4420 BEACON CIRCLE  
WEST PALM BEACH, FL 33407 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: MICHAEL J. POSNER, ESQ.

04/20/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: RAPINO, MARIE  
Address: 6768 10TH AVE N #412  
City-St-Zip: LAKE WORTH, FL 33467 US

Title: VD  
Name: KATZ, SIMON  
Address: 6768 10TH AVE N #416  
City-St-Zip: LAKE WORTH, FL 33467 US

Title: SD  
Name: GOLDMAN, SAUL  
Address: 6768 10TH AVE N #113  
City-St-Zip: LAKE WORTH, FL 33467 US

Title: TD  
Name: GROSSMAN, MARTIN  
Address: 6768 10TH AVE N #107  
City-St-Zip: LAKE WORTH, FL 33467 US

Title: D  
Name: TILSON, SAUL  
Address: 6768 10TH AVE N #114  
City-St-Zip: LAKE WORTH, FL 33467 US

I hereby 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 all other like empowered.

SIGNATURE: BRIAN MCENTEE

APM

04/20/2011

Electronic Signature of Signing Officer or Director

Date