## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 769261** 

FILED Apr 07, 2010 Secretary of State

Entity Name: EDEN PLACE CONDOMINIUM ASSOCIATION, INC.

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

C/O CENTURY MANAGEMENT SERVICES, INC.

C/O PHOENIX MANAGEMENT SERVICES

1495 NORTHPARK DRIVE 3082 JOG ROAD WESTON, FL 33326 US LAKE WORTH, FL 33467 US

Current Mailing Address: New Mailing Address:

C/O CENTURY MANAGEMENT SERVICES, INC. C/O PHOENIX MANAGEMENT SERVICES

1495 NORTHPARK DRIVE 3082 JOG ROAD

WESTON, FL 33326 US LAKE WORTH, FL 33467 US

FEI Number: 59-2529388 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:

BAKALAR & EICHNER, PA.

150 SOUTH PINE ISLAND ROAD

SUITE #540

DICKER KRIVOK & STOLOFF, P.A

1818 AUSTRALIAN AVE SOUTH
SUITE #400

PLANTATION, FL 3324 US WEST PALM BEACH, FL 33409 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: DAVID ROSENTAL 04/07/2010

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PD

Name: WHITEMAN, RALPH

Address: 637 EXECUTIVE CENTER DRIVE - N104

City-St-Zip: WEST PALM BEACH, FL 33401

Title: SDTD

Name: STEWARD, CATHERINE

Address: 645 EXECUTIVE CENTER DRIVE - R101

City-St-Zip: WEST PALM BEACH, FL 33401

Title: VPD

Name: RIVERA, WILLIAM Address: P.O BOX 15284

City-St-Zip: WEST PALM BEACH, FL 33416

Title:

Name: SIMON, KATHY

Address: 629 EXECUTIVE CENTER DRIVE - J104

City-St-Zip: WEST PALM BEACH, FL 33401

Title:

Name: WHITEMAN, ROGER

Address: 637 EXECUTIVE CENTER DRIVE -R204 City-St-Zip: WEST PALM BEACH, FL 33401

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: RALPH WHITEMAN PD 04/07/2010