

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 31, 2003 8:00 am**  
**Secretary of State**

01-31-2003 90096 007 \*\*\*\*\*70.00

**DOCUMENT # N01000003437**

1. Entity Name

**PALM BEACH CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business

**13800 STATE RD. 535  
ORLANDO FL 32821**

Mailing Address

**13800 STATE RD. 535  
ORLANDO FL 32821**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3716885**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
PLANTATION FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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 registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete  
NAME **THOMAS, THORP S**  
STREET ADDRESS **13800 STATE RD. 535**  
CITY-ST-ZIP **ORLANDO FL 32821**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☐ Delete  
NAME **POPE, JOEL**  
STREET ADDRESS **13800 STATE RD. 535**  
CITY-ST-ZIP **ORLANDO FL 32821**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☐ Delete  
NAME **CLINTON, GLEN**  
STREET ADDRESS **13800 STATE RD. 535**  
CITY-ST-ZIP **ORLANDO FL 32821**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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.

**PALM BEACH CONDOMINIUM ASSOCIATION, INC.**

SIGNATURE: By: **SIGNATURE REQUIRED** **Thorp, Thomas, President**

CR2E037 (10/02)

Attachment

30026744

NO1000003437



**STARWOOD**

VACATION OWNERSHIP, INC.

**VIA DHL DELIVERY**

February 1, 2002

State of Florida  
Department of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, Florida 32399

Re: PALM BEACH CONDOMINIUM ASSOCIATION, INC.  
Document #N01000003437

To Whom It May Concern:

Enclosed is the completed 2003 Uniform Business Report for the above referenced, along with a check in the amount of \$70.00 representing the renewal and additional fees for Certificate of Status.

Please process accordingly and forward the Certificate of Status to:

Jennifer Lizotte  
Starwood Vacation Ownership, Inc.  
Legal Services Department  
8801 Vistana Centre Drive  
Orlando, Florida 32821

I can be reached directly at (407) 239-3593 should you have any questions or require further clarification. Thank you.

Sincerely,

Jennifer A. Lizotte  
Paralegal, Licensing and Insurance

jal  
Enclosures

