


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 10, 2007 08:00 AM
Secretary of State

DOCUMENT # N02000009738 1. Entity Name 300 PALM CONDOMINIUM ASSOCIATION, INC.	
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Principal Place of Business C/O STEVEN KRISCHER 12881 COUNTRY GLEN DRIVE COOPER CITY, FL 33330	Mailing Address C/O STEVEN KRISCHER 12881 COUNTRY GLEN DRIVE COOPER CITY, FL 33330
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07052007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 82-0585866	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent KRISCHER, STEVEN L 12881 COUNTRY GLEN DRIVE COOPER CITY, FL 33330
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**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$61.25
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DELGADO, OSCAR J 7950 NW 155 ST STE 104 MIAMI LAKES, FL 33016
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KRISCHER, STEVEN 12881 COUNTRY GLEN DRIVE COOPER CITY, FL 33330
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KRISCHER, JEFFREY 12881 COUNTRY GLEN DRIVE COOPER CITY, FL 33330
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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07/10/07-80017-013 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE Elena Caro
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-5-07 (305) 883-7777
Date Daytime Phone #