

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009738

FILED  
Apr 24, 2009  
Secretary of State

Entity Name: 300 PALM CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O STEVEN KRISCHER  
340 PALM AVE  
HIALEAH, FL 33010

**New Principal Place of Business:**

**Current Mailing Address:**

C/O STEVEN KRISCHER  
340 PALM AVE  
HIALEAH, FL 33010

**New Mailing Address:**

FEI Number: 82-0585866      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CARD, ELENA  
340 PALM AVE  
HIALEAH, FL 33010      US

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

CARO, ELENA  
340 PALM AVE  
HIALEAH, FL 33010      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: ELENA CARO

04/24/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: CARD, ELENA  
Address: 340 PALM AVE  
City-St-Zip: HIALEAH, FL 33010

Title: D      ( ) Delete  
Name: PEREZ, CIRA  
Address: 340 PALM AVE  
City-St-Zip: HIALEAH, FL 33010

Title: D      ( ) Delete  
Name: PINERO, NURY  
Address: 340 PALM AVE  
City-St-Zip: HIALEAH, FL 33010

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

Title: D      (X) Change ( ) Addition  
Name: CARO, ELENA  
Address: 340 PALM AVE  
City-St-Zip: HIALEAH, FL 33010

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: ELENA CARO

D

04/24/2009

Electronic Signature of Signing Officer or Director

Date