

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008760

FILED
Apr 27, 2009
Secretary of State

Entity Name: PALAZZO DEL MARE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

20110 GULF BLVD
INDIAN SHORES, FL 33785

New Principal Place of Business:

Current Mailing Address:

352 150TH AVENUE
SUITE E
MADEIRA BEACH, FL 33708

New Mailing Address:

19535 GULF BLVD
SUITE E
INDIAN SHORES, FL 33785

FEI Number: 06-1711546

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAGE, EVELYN
20110 GULF BLVD
UNIT 101
INDIAN ROCKS BEACH, FL 33785 US

Name and Address of New Registered Agent:

ADAMS, JOYCE
19535 GULF BLVD
SUITE E
INDIAN SHORES, FL 33785 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: JOYCE ADAMS

04/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PAGE, EVELYN
Address: 20110 GULF BLVD, UNIT 101
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: V () Delete
Name: MUIR, BARBARA
Address: 20110 GULF BLVD. # 100
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: ST () Delete
Name: ODLE, JACQUELYN
Address: 902 LOCKHART STREET
City-St-Zip: HOOPESTON, IL 60942

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOYCE ADAMS

LCAM

04/27/2009

Electronic Signature of Signing Officer or Director

Date