2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT								FILED Sep 02, 2005 8:00 am Secretary of State				
		# N0400003				CUI CUA 09-02-2005 9	•					
1. Entity Nam PALAZZC		CONDOMINIUM A	SSOCI	ATION, INC.				09-02-2003 .	20011 0	09 01		
Principal Place of Business 3030 N OCEAN BLVD FT LAUDERDALE, FL 33308				g Address D N OCEAN BLVD AUDERDALE, FL 3	3308	I						
2. Principal P	lace of Busir	ness	3. Mailing Address									
Suite, Apt. #, etc.				nite, Apt. #, etc.		07312005 Chg-NP CR2E037 (10/03)						
City & State				ty & State			4. FEI Number	plied For				
Zip	Zip Country			þ	Cou	untry	5. Certificate of	Status Desired		\$8.75 Add Fee Required		
	8. Name	and Address of Current	i Registen	xi Agent	.I		7. Name and A	ddress of New F	legistered			
FIENBERG	G, JEFFRI	EY ESQ				Name	•					
	LYWOOD	BLVD STE 350										
						City				Zip Code)	
			r the purp	oose of changing its	s register	ed office or regis	tered agent, or both	, in the State of Fi		<u></u>	and accept	
the obligat	ions of regis	tered agent.										
SIGNATURE .	Signature, typec	l or printed name of registered agent	end title if ap	plicable. (NOT	IE: Registere	ki Agent signature requ	ired when reinstating)		DATE	·		
Filing Fee is \$61.259. Election CanDue by September 7, 2005Trust Fund Can					Contributi		\$5.00 May Be Added to Fees	Added to Fees Florida Department of State				
10. TITLE	DP	OFFICERS AND DIF	ECTORS		11. 		ADDITIONS/CHAP	NGES TO OFFICE	FIS AND D	Change	10 Addition	
NAME STREET ADDRESS	BRIDY, E 3030 N O	CEAN BLVD			NAM STRE	ie Eet address				C) Grange		
CITY-ST-ZIP TITLE	DVT	ERDALE, FL 33308		Detete		-ST-ZTP				Change	Addition	
NAME STREET ADDRESS	3030 N O	, ANTHONY CEAN BLVD				ET ADDRESS						
CITY-ST-ZIP	DS	ERDALE, FL 33308		Delete	CITY	-ST-ZIP				Change	Addition	
NAME STREET ADDRESS	SIPALA, . 3030 N O	CEAN BLVD			NAM STRE	le Eet address				,		
CITY-ST-ZP TITLE	FTLAUD	ERDALE, FL 33308		Delete	TITLE					Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP						e Eet address '- St-Zip						
mle	<u> </u>			Delete	τημ	E		<u>· .</u>		Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP						ie Eet address *-st-zip						
me				Delete	mu	E	··	·		Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP						IE EET ADDRESS • ST- ZIP						
12. i hereby	certify that th	ne information supplied with ort or supplemental report is	this filing	does not qualify fo	x the exe	mption stated in	Section 119.07(3)(i),	Florida Statutes.	I further co	ertify that the in	iformation or director	
l of the co	rporation or t	the receiver or trustee emp tachment with an address	wered to	execute this report	t as reoui	ired by Chapter	517, Florida Statutes:	and that my nam	ne appears	in Block 10 or	Block 11 if	
SIGNAT		SUGALATURE AND PIPED OR	Dy	19 Edw	and I	<u>A. Brid</u>	y Augus	128,200	5 (8	54)565-	5405	
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