

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002421

FILED
Apr 20, 2011
Secretary of State

Entity Name: NORTH PALM HARBOR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

416 - 420 NORTHLAKE CT
NORTH PALM BEACH, FL 33408 US

New Principal Place of Business:

416 - 420 NORTHLAKE CT
BOX #4
NORTH PALM BEACH, FL 33408 US

Current Mailing Address:

416 NORTHLAKE CT
BOX #4
NORTH PALM BEACH, FL 33408 US

New Mailing Address:

416 - 420 NORTHLAKE CT
BOX #4
NORTH PALM BEACH, FL 33408 US

FEI Number: 06-1749082

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTSON, LORRAINE
416 NORTHLAKE CT, UNIT #11
NORTH PALM BEACH, FL 33408 US

Name and Address of New Registered Agent:

ROBERTSON, LORRAINE
416 NORTHLAKE CT #11
NORTH PALM BEACH, FL 33408 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: LORRAINE ROBERTSON

04/20/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: ROBERTSON, LORRAINE
Address: 416 NORTHLAKE CT UNIT #11
City-St-Zip: NORTH PALM BEACH, FL 33408 US

Title: VD
Name: CROKE, TERRANCE
Address: 420 NORTHLAKE CT #3
City-St-Zip: NORTH PALM BEACH, FL 33408 US

Title: STD
Name: DAVIS, KATHLEEN
Address: 416 NORTHLAKE CT UNIT #7
City-St-Zip: NORTH PALM BEACH, FL 33408 US

I hereby 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 all other like empowered.

SIGNATURE: LORRAINE ROBERTSON

PRES

04/20/2011

Electronic Signature of Signing Officer or Director

Date