

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006536

FILED  
Feb 21, 2009  
Secretary of State

**Entity Name:** THE PALMS OF CORTEZ CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

4802 51ST ST W  
BRADENTON, FL 34210

**New Principal Place of Business:**

**Current Mailing Address:**

4802 51ST ST W  
BRADENTON, FL 34210

**New Mailing Address:**

C/O CASTLE MANAGEMENT  
PO BOX 559009  
FORT LAUDERDALE, FL 33355

**FEI Number:** 20-3821072

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GREGORIO, DAN  
4802 51ST ST W  
BRADENTON, FL 34210 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GREGORIO, DAN  
Address: 4802 51ST STREET WEST  
City-St-Zip: BRADENTON, FL 34210

Title: VP ( ) Delete  
Name: RATNER, BRIDGET  
Address: 4802 51ST STREET W  
City-St-Zip: BRADENTON, FL 34210

Title: TD ( ) Delete  
Name: BOCCIO, SAL  
Address: 4802 51ST ST W  
City-St-Zip: BRADENTON, FL 34210

Title: D ( ) Delete  
Name: LEVESQUE, ED  
Address: 4802 51ST ST W  
City-St-Zip: BRADENTON, FL 34210

Title: SD ( ) Delete  
Name: RYAN, DAVE  
Address: 4802 51ST STREET WEST  
City-St-Zip: BRADENTON, FL 34210

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

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

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

Title: SD (X) Change ( ) Addition  
Name: BOCCIO, SAL  
Address: 4802 51ST ST W  
City-St-Zip: BRADENTON, FL 34210

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

Title: TD (X) Change ( ) Addition  
Name: RYAN, DAVE  
Address: 4802 51ST STREET WEST  
City-St-Zip: BRADENTON, FL 34210

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: ROBERT A DONNELLY

MGR

02/21/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date