

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 27, 2009  
Secretary of State**

DOCUMENT# N05000012512

Entity Name: 720 N STREET CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

720 N STREET  
W PALM BEACH, FL 33401

**New Principal Place of Business:**

**Current Mailing Address:**

P.O BOX 212368  
WEST PALM BEACH, FL 33421

**New Mailing Address:**

FEI Number: 20-2849492      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

JONES FOSTER SERVICE, LLC  
505 S FLAGLER DR  
STE 1100  
W PALM BEACH, FL 33401 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: WILLINGHAM, TIMOTHY R  
Address: 11832 OSPREY POINT CIR  
City-St-Zip: WELLINGTON, FL 33467

Title: VPD ( ) Delete  
Name: FLOREZ, JAIME  
Address: 258 LAS PALMAS ST  
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: STD ( ) Delete  
Name: FLOREZ, MONICA V  
Address: 11832 OSPREY POINT CIR  
City-St-Zip: WELLINGTON, FL 33467

**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: JAIME FLOREZ

VPD

03/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date