2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 25, 2001 8:00 am
Secretary of State
05-25-2001 90292 015 ****61.25

DOCUMENT # N05119

1. Entity Name
THE PALM CLUB WEST VILLAGE I CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business / Mailing Address
3720 SAVOY LANE
WEST PALM BEACH FL. 33417
CHANGED 5/17/1999

A00071886

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	3720 SAVOY LANE Suite, Apt. #, etc.
City & State	City & State W.P.B. FL.
Zip / Country	Zip 33417 / Country

4. FEI Number 592534805 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MERZOLA, JAMES R. 11330 PROSPERITY FARMS ROAD STE 204 PALM BEACH GARDENS FL. 33410	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRESIDENT KAPLAN, MIKE 3714 SAVOY LN. C W.P.B. FL. 33417	☐ Delete	PRESIDENT CARSON, KEITH 3695 SAVOY LN. B W.P.B. FL. 33417	☐ Change	☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRESIDENT FRANCOEUR, RAYMOND 3588 ALOCK DR. F-2 W.P.B. FL. 33417	☑ Delete	SECRETARY LANDSMAN, NORMAN 3714 SAVOY LN. W.P.B. FL. 33417	☐ Change	☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRESIDENT DEDRICK, ROBERT 3650 ALOCK DR. H-2 W.P.B. FL. 33417	☐ Delete		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER BANNISTER, ROBERT 3670 ALOCK DR. H-2 W.P.B. FL. 33417	☐ Delete		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY KOAF, DELORES 3701 SAVOY LN. B W.P.B. FL. 33417	☑ Delete		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition

CR2E037 (11/00)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert E Dedrick 5/21 (561) 683-7018
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #