2005 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N05119

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



FILED Apr 25, 2005 8:00 am Secretary of State

04-25-2005 90309 005 ****61.25

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2328 S CONGRESS AVE. STE. 2A			2328 STE. 2	Mailing Address 2328 S CONGRESS AVE. STE. 2A WEST PALM BEACH, FL 33406				1 18 8 1 17 8 1 8 1	1 11 11 111 2 1 11111	ı iriniya Finti Ar			3846	
2. Principal Place of Business 3.			3. Maili	3. Mailing Address										
Suite, Apt. #, etc.			Suil	Suite, Apt. #, etc.				01172005	Chg-NP		CR2E0	37 (10/03	3)	
City & State			City & State					4. FEI Numb 59-253				<u> </u>	Applied For Not Applicable	
Zip	Zip Country		Zip	Zip (intry		5. Certificate	of Status De	sired		\$8.75 / Fee Requ		
	6. Name	and Address of Current F	Registere	d Agent				7. Name and	Address of	New Reg	gistered	Agent		
DIREKTO	R KENNE	TH:		- · · · ·	İ	Name-	•							
DIREKTOR, KENNETH 500 AUSTRALIAN AVE., SOUTH, 9TH FLOOR PALM BCH GARDENS, FL 33410						Street Address (P.O. Box Number is Not Acceptable)								
TALM BOTT GARDENO, FE 30410				City								Zip C	ode	
						,					FL	•		
	named entit tions of regist	ly submits this statement for tered agent.	the purpo	ose of changing its r	egistere	ed office or i	register	ed agent, or bo	th, in the Stat	e of Fiorio	da. 1 am	familiar wi	th, and accept	
	4	Robert E V	1	٠ .		-								
SIGNATURE .	Signature typed	or printed name of registered agent as		NOTE:	Registered	d acent sumetion	~ remired	when reinstating)	****		DATE			
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Filing Fee is \$61.25 Due by May 1, 2005				* 4		9. Election Campaign Financing Trust Fund Contribution.								
	•	•						\$5.00 May E Added to Fees	3e			k payable tment of		
10.	Due by N	•	ECTORS					\$5.00 May E Added to Fees ADDITIONS/CH		Florid	a Depai	tment of	State	
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12. I hereby certify that the information supplied with this filling 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.

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/05

Daytime Phone #