

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 07, 2008 8:00 am
Secretary of State

04-07-2008 90029 016 ****61.25

DOCUMENT # N05169

1. Entity Name

PALM CHASE ASSOCIATION, INC.



Principal Place of Business

**10755 PALM LAKE AVENUE
BOYNTON BCH. FL 33437**

Mailing Address

**10755 PALM LAKE AVENUE
BOYNTON BCH. FL 33437**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2474055

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

**CONN, ALLAN
10592 TROPIC PALM AVE.
BOYNTON BEACH FL 33437**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Allan M. Conn

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

Due By: May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
COHN, ALLAN
10592 TROPIC PALM AVE
BOYNTON BEACH FL 33437** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MELTZER, ZABATHY
10915 PALM LAKE AVE APT 102
BOYNTON BEACH FL 33437** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
CHOPER, PHYLLIS
10702 BEACH PALM CT B
BOYNTON BEACH FL 33437** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
GOLDBERG, HOWARD
10789 BAHAMA PALM WAY #202
BOYNTON BEACH FL 33437** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ROSENBLATT, RICHARD
10924 DOLPHIN PALM CT.
BOYNTON BEACH FL 33437** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
HOLTZMAN, HELEN
10714 BCH PALM CT
BOYNTON BEACH FL 33437** ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DIR.
SPRINGER, LEON
10695 Ocean Palm Way APT 101
Boynton Beach, FL 33437** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DIR
Goldberg, Howard
10789 Bahama Palm Way APT 202
Boynton Beach, FL 33437** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Secretary
Holtzman, Helen
10714 Bch Palm ct
Boynton Beach, FL 33437** ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Allan M. Conn, Pres.