

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000067

FILED
Feb 19, 2009
Secretary of State

Entity Name: PONTE VERDE AT PALM BEACH LAKES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O GRS MANAGEMENT ASSOCIATES, INC.
3900 WOODLAKE BLVD., STE 309
LAKE WORTH, FL 33463

New Principal Place of Business:

Current Mailing Address:

C/O GRS MANAGEMENT ASSOCIATES, INC.
3900 WOODLAKE BLVD., STE 309
LAKE WORTH, FL 33463

New Mailing Address:

FEI Number: 20-5397615

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROUGH, CHADROW & LEVINE, P.A.
1900 N COMMERCE PARKWAY
WESTON, FL 33326 US

Name and Address of New Registered Agent:

RITTER, ZARETSKY & LIEBER
555 NE 15TH STREET
100
MIAMI, FL 33132 US

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: LOUIS D ZARETSKY

02/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: POYASTRO, MIGUEL
Address: 8500 SW 8TH ST., SUITE 228
City-St-Zip: MIAMI, FL 33144

Title: VD () Delete
Name: HERRAN, EMILIANO
Address: 8500 SW 8TH ST., SUITE 228
City-St-Zip: MIAMI, FL 33144

Title: STD () Delete
Name: VALDEZ, ANGEL
Address: 8500 SW 8TH ST., SUITE 228
City-St-Zip: MIAMI, FL 33144

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: MIGUEL POYASTRO

P

02/19/2009

Electronic Signature of Signing Officer or Director

Date