

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006857

FILED  
Jan 08, 2012  
Secretary of State

**Entity Name:** LAS PALMAS CONDOMINIUM ASSOCIATION OF JACKSONVILLE, INC.

**Current Principal Place of Business:**

3517 PEELER ROAD  
20  
JACKSONVILLE, FL 32277

**New Principal Place of Business:**

**Current Mailing Address:**

3517 PEELER ROAD  
20  
JACKSONVILLE, FL 32277

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

PAGEL, GREGORY  
3517 PEELER RD.  
20  
JACKSONVILLE, FL 32277 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: P  
Name: PAGEL, GREGORY  
Address: 3517 PEELER RD., 20  
City-St-Zip: JACKSONVILLE, FL 32277

Title: VP  
Name: GRAVES, BRIANNE  
Address: 3517 PEELER RD., 11  
City-St-Zip: JACKSONVILLE, FL 32277

Title: T  
Name: STERN, MERRI B  
Address: 3517 PEELER RD, 25  
City-St-Zip: JACKSONVILLE, FL 32277

Title: S  
Name: GRAVES, MATTHEW  
Address: 3517 PEELER RD., 11  
City-St-Zip: JACKSONVILLE, FL 32277

I hereby 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 all other like empowered.

SIGNATURE: GREGORY PAGEL

P

01/08/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date