

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 31, 2009
Secretary of State

DOCUMENT# N06000011447

Entity Name: 200 EAST PALMETTO PARK CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**200 EAST PALMETTO PARK RD.
MANAGEMENT OFFICE
BOCA RATON, FL 33432**New Principal Place of Business:****Current Mailing Address:**200 EAST PALMETTO PARK RD.
MANAGEMENT OFFICE
BOCA RATON, FL 33432**New Mailing Address:****FEI Number:** 26-1210153**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ATKINSON III, WILSON C ESQUIRE
ONE FINANCIAL PLAZA
SUITE 1400
FORT LAUDERDALE, FL 33394 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:** PD () Delete
Name: TABATCHNICK, LON
Address: 3501 N. OCEAN DRIVE #4D
City-St-Zip: HOLLYWOOD, FL 33019 US**Title:** VSD () Delete
Name: SCHWARTZ, HOWARD
Address: 16 MICROLAB RD
City-St-Zip: LIVINGSTON, NJ 07039 US**Title:** TD () Delete
Name: PANTIRER, LARRY
Address: 16 MICROLAB RD
City-St-Zip: LIVINGSTON, NJ 07039 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** SD (X) Change () Addition
Name: AUERBACH, ROBERT
Address: 1835 HARBOR POINTE CIRCLE
City-St-Zip: WESTIN, FL 33327 US

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: LON TABATCHNICK

PD

08/31/2009

Electronic Signature of Signing Officer or Director

Date