2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2008
Secretary of State

DOCUMENT# N06000012826

Entity Name: TOWN CENTRE NORTH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

125 CABELL DRIVE
PORT ST JOE, FL 32456

New Principal Place of Business:

Current Mailing Address:

125 CABELL DRIVE
PORT ST JOE, FL 32456

New Mailing Address:

P O BOX 159
PORT ST JOE, FL 32457 01

FEI Number: 20-8858423 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PALMER, MORRIS
125 CABELL DRIVE
PORT ST JOE, FL 32456 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: PALMER, MORRIS
Address: PO BOX 159
City-St-Zip: PORT ST JOE, FL 324570159

Title: VPD ( ) Delete
Name: DUCIMETIERE-MONOD, OLIVIER
Address: PO BOX 159
City-St-Zip: PORT ST JOE, FL 324570159

Title: STD ( ) Delete
Name: PALMER, TERESA A
Address: PO BOX 159
City-St-Zip: PORT ST JOE, FL 324570159

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: MORRIS PALMER PD 04/08/2008

Electronic Signature of Signing Officer or Director — Date