2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 07, 2008
Secretary of State

DOCUMENT# N07000004928

Entity Name: PALM BREEZE OF PALM CITY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

% PRINTS OF PARADISE, INC.
8395 SE PALM ST
HOBE SOUND, FL 33455

New Principal Place of Business:

Current Mailing Address:

% PRINTS OF PARADISE, INC.
8395 SE PALM ST
HOBE SOUND, FL 33455

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

VAN VONNO, FRED W ESQ
3473 SE WILLOUGHBY BLVD
STUART, FL 34994 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: D ( ) Delete
Name: MACKIN, DANIEL
Address: 8395 SE PALM ST
City-St-Zip: HOBE SOUND, FL 33455

Title: D ( ) Delete
Name: MACKIN, JEANNE
Address: 8395 SE PALM ST
City-St-Zip: HOBE SOUND, FL 33455

Title: D ( ) Delete
Name: PRUETT, KIMBERLY
Address: 8395 SE PALM ST
City-St-Zip: HOBE SOUND, FL 33455

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: DAN MACKIN OFFI 08/07/2008

Electronic Signature of Signing Officer or Director — Date