

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008733

FILED
Apr 03, 2009
Secretary of State

Entity Name: 2700 NORTH OCEAN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4300 CATALFUMO WAY NORTH
PALM BEACH GARDENS, FL 334104248 US

New Principal Place of Business:

2700 NORTH OCEAN DRIVE
SINGER ISLAND, FL 33404 US

Current Mailing Address:

4300 CATALFUMO WAY NORTH
PALM BEACH GARDENS, FL 334104248 US

New Mailing Address:

2700 NORTH OCEAN DRIVE
SINGER ISLAND, FL 33404 US

FEI Number: 26-0851634

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JACOBY, JAMES E
4300 CATALFUMO WAY NORTH
PALM BEACH GARDENS, FL 334104248 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: CATALFUMO, DANIEL S
Address: 4300 CATALFUMO WAY NORTH
City-St-Zip: PALM BEACH GARDENS, FL 334104248 US

Title: VD () Delete
Name: JACOBY, JAMES E
Address: 4300 CATALFUMO WAY NORTH
City-St-Zip: PALM BEACH GARDENS, FL 334104248 US

Title: SD () Delete
Name: EICHNER, JOEY A
Address: 4300 CATALFUMO WAY NORTH
City-St-Zip: PALM BEACH GARDENS, FL 334104248 US

Title: T () Delete
Name: SIMONSON, PAUL
Address: 4300 CATALFUMO WAY NORTH
City-St-Zip: PALM BEACH GARDENS, FL 334104248 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: FAYERMAN, PETER
Address: 2700 NORTH OCEAN DRIVE
City-St-Zip: SINGER ISLAND, FL 33404 US

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: JOEY A EICHNER

SD

04/03/2009

Electronic Signature of Signing Officer or Director

Date