2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008784

FILED Jan 21, 2009 Secretary of State

Entity Name: COLONIAL PALMS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1930 HARRISON STREET SUITE #502 3990 SHERIDAN ST HOLLYWOOD, FL 33020

SUITE 214

HOLLYWOOD, FL 33021

Current Mailing Address: New Mailing Address:

1930 HARRISON STREET SUITE #502 P.O. BOX 801733 HOLLYWOOD, FL 33020 MIAMI, FL 33280

FEI Number: 26-0859167 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BENENSON, ALAN BOTSFORD & WHITE, PA 1930 HARRISON STREET SUITE #502 3595 SHERIDAN ST

HOLLYWOOD, FL 33020 SUITE 208 HOLLYWOOD, FL 33021 US

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: BRUCE BOTSFORD 01/21/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

BENENSON, ALAN BENENSON, ALAN Name: Name: 1930 HARRISON STREET SUITE #502 Address: 3990 SHERIDAN ST, SUITE 214 Address:

City-St-Zip: HOLLYWOOD, FL 33020 City-St-Zip: HOLLYWOOD, FL 33021

Title: SD () Delete Title: (X) Change () Addition SHER, MICHAEL Name: SHER, MICHAEL Name:

Address: 1930 HARRISON STREET SUITE #502 Address: 3990 SHERIDAN ST. SUITE 214

City-St-Zip: HOLLYWOOD, FL 33020 City-St-Zip: HOLLYWOOD, FL 33021

Title: () Delete Title: (X) Change () Addition

JAFFE, SCOTT Name: JAFFE, SCOTT Name:

1930 HARRISON STREET SUITE #502 3990 SHERIDAN ST, SUITE 214 Address: Address: City-St-Zip: HOLLYWOOD, FL 33020 City-St-Zip: HOLLYWOOD, FL 33021

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: ALAN BENENSON PD 01/21/2009