

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010777

FILED
Jan 27, 2010
Secretary of State

Entity Name: ATLANTIC PALMS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5979 NW 151 ST.
SUITE 101
MIAMI LAKES, FL 33014

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 160718
HIALEAH, FL 33016

New Mailing Address:

5979 NW 151 ST.
SUITE 101
MIAMI LAKES, FL 33014

FEI Number: 26-1572117

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WAREN, FRANK D
400 NW 65 AVE
APT# 105
MARGATE, FL 33063 US

Name and Address of New Registered Agent:

YOUNG, ANGELICA
5901 SW 74TH ST
SUITE 300
MIAMI, FL 33143 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: ANGELICA YOUNG

01/27/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: COOPER, PENCILA
Address: 400 NW 65 AVE #232
City-St-Zip: MARGATE, FL 33063

Title: VP
Name: TORO, CHAMELY
Address: 400 NW 65 AVE #127
City-St-Zip: MARGATE, FL 33063

Title: S
Name: LOUDENSLAGER, MARY J
Address: 400 NW 65 AVE #201
City-St-Zip: MARGATE, FL 33063

Title: T
Name: WILLIAMS, HELEN P
Address: 400 NW 65 AVE #123
City-St-Zip: MARGATE, FL 33063

Title: D
Name: HARRISON, DELPHINE
Address: 400 NW 65TH AVE #218
City-St-Zip: MARGATE, FL 33063

I hereby 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 all other like empowered.

SIGNATURE: PENCILA COOPER

P

01/27/2010

Electronic Signature of Signing Officer or Director

Date