# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 21, 2009**
**Secretary of State**

DOCUMENT# N08000006925

**Entity Name:** CITY PALMS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

480 HIBISCUS STREET
WEST PALM BEACH, FL 33401

**New Principal Place of Business:**

**Current Mailing Address:**

480 HIBISCUS STREET
WEST PALM BEACH, FL 33401

**New Mailing Address:**

**FEI Number: 26-3432478** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

HERNANDEZ, HARVEY
1790 CORAL WAY
SUITE 100
MIAMI, FL 33145 US

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

NORMAN, ANDREA
480 HIBISCUS STREET
WEST PALM BEACH, FL 33401 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: ANORMAN 04/21/2009
Electronic Signature of Registered Agent — Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete
Name: HERNANDEZ, HARVEY
Address: 1790 CORAL WAY #100
City-St-Zip: MIAMI, FL 33145

Title: ST ( ) Delete
Name: COLEMAN, MARC
Address: 1790 CORAL WAY #100
City-St-Zip: MIAMI, FL 33145

Title: P ( ) Delete
Name: SISTEK, ROBERT
Address: 480 HIBISCUS STREET
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VP ( ) Delete
Name: DANIEL, DAVID
Address: 480 HIBISCUS STREET
City-St-Zip: WEST PALM BEACH, FL 33401

**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:

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: PRESIDENT RS 04/21/2009
Electronic Signature of Signing Officer or Director — Date