2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # N12245 01-25-2007 90043 044 ****61.25 PRESIDENTIAL WAY ASSOCIATION, INC. Principal Place of Business Mailing Address 1690 PRESIDENTIAL WAY 1690 PRESIDENTIAL WAY WEST PALM BEACH, FL 33401 WEST PALM BEACH, FL 33401 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt, #, etc. Suite, Apt. #, etc. 01052007 Chg-NP CR2E037 (12/06) Applied For 4. FEI Number 59-2625362 City & State City & State Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ST. JOHN, CORE & LEMME, P.A. Street Address (P.O. Box Number is Not Acceptable) 1601 FORUM PLACE - SUITE 701 WEST PALM BEACH, FL 33401 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Bagistered Agent signature regused when renstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Florida Department of State Trust Fund Contribution. Due by May 1, 2007 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS Presiden T TITLE Delete IHAEL GERST ROSENTHAL, SIDNEY MAME NAME PresidenTIAL WAY #40 STREET ADDRESS 2427 PRESIDENTIAL WAY STREET ADDRESS WEST PALM BEACH, FL 33401 CITY-51-7IP CITY-ST-7IP Change TITLE Delete TITLE Addition FISKE, PRISCILLA NAME 2427 PRESIDENTIAL WAY STREET ADDRESS STREET ADDRESS WEST PALM BEACH, FL 33401 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Addition WEINSTEIN, NORMAN NAME NAME STREET ADDRESS 2427 PRESIDENTIAL WAY STREET ADDRESS WEST PALM BEACH, FL 33401 CITY-ST-7IP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME MARKE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

FILED

Jan 25, 2007 8:00 am

SIGNATURE: Norman Weinstein, Treasurer 1/18/07 561/883-1001

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the refereiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachylight with an address with all other like empowered.