

**2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 26, 2011  
Secretary of State**

DOCUMENT# N13344

**Entity Name:** TRUMP PLAZA OF THE PALM BEACHES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

525 SOUTH FLAGLER DR.  
W. PALM BEACH, FL 334015925

**New Principal Place of Business:**

**Current Mailing Address:**

525 SOUTH FLAGLER DR.  
W. PALM BEACH, FL 334015925

**New Mailing Address:**

**FEI Number:** 59-2466264      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

VAN LIEW, ROBERT J  
525 SOUTH FLAGLER DRIVE  
WEST PALM BEACH, FL 33401      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: P  
Name: BERNSTEIN, ABE  
Address: 525 SOUTH FLAGLER DR  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VP  
Name: GROH, CAROL  
Address: 525 S FLAGLER DR  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: S  
Name: BERLINER, HAROLD  
Address: 529 S. FLAGLER DR.  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: T  
Name: DRUSKIN, KEN  
Address: 529 S FLAGLER DR  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D  
Name: ADAMS, LESLIE  
Address: 525 S. FLAGLER DR  
City-St-Zip: WEST PALM BEACH, FL 33401

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: CAROL GROH

VP

04/26/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date