# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 25, 2006**
**Secretary of State**

DOCUMENT# N24673

**Entity Name:** FOREST PLAZA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1521 FOREST HILL BLVD., SUITE 3
WEST PALM BEACH, FL 33406 US

**New Principal Place of Business:**

**Current Mailing Address:**

1521 FOREST HILL BLVD., SUITE 3
WEST PALM BEACH, FL 33406 US

**New Mailing Address:**

**FEI Number: 20-3541572** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

GARONE, GIL
1521 FOREST HILL BLVD., SUITE 3
WEST PALM BEACH, FL 33406 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: PD ( ) Delete
Name: GARONE, GIL
Address: 1521 FOREST HILL BLVD., SUITE 3
City-St-Zip: WEST PALM BEACH, FL 33406 US

Title: VSD ( ) Delete
Name: GARONE, PAULA A
Address: 1521 FOREST HILL BLVD., SUITE 3
City-St-Zip: WEST PALM BEACH, FL 33406 US

Title: D ( ) Delete
Name: GARONE BLATZ, MARISSA
Address: 1521 FOREST HILL BLVD., SUITE 3
City-St-Zip: WEST PALM BEACH, FL 33406 US

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

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: GARONE BLATZ, MARISSA A
Address: 1521 FOREST HILL BLVD., SUITE 3
City-St-Zip: WEST PALM BEACH, FL 33406 US

I hereby certify that the information supplied with this filing does not qualify for the 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: GIL GARONE PD 04/25/2006

Electronic Signature of Signing Officer or Director — Date