


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 12, 2007 8:00 am
Secretary of State

04-12-2007 90019 046 ****61.25

DOCUMENT # N34675 1. Entity Name THE PERUVIAN COURT CONDOMINIUM ASSOCIATION, INC.	
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Principal Place of Business 173 PERUVIAN AVENUE PALM BEACH, FL 33480	Mailing Address 3307 NORTH LAKE BLVD STE 107 WEST PALM BEACH, FL 33403
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DO NOT WRITE IN THIS SPACE



04032007 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0252908	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent COMPLETE PROPERTY MANAGEMENT INC 3307 NORTH LAKE BLVD STE 107 WEST PALM BEACH, FL 33403
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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.

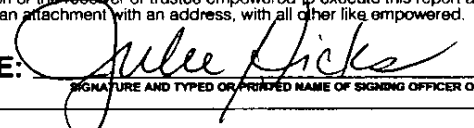
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP HICKS, JULIE 400 SW 17TH STREET BOCA RATON, FL 33432
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS JETSON, CATHY 200 RIVERWAY DRIVE VERO BEACH, FL 32963
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS LOOKABAUGH, CINDY 173 PORURIAN AVE STE 3 PALM BEACH, FL 33480
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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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 receiver 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 attachment with an address, with all other like empowered.

SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	4/9/07 (361) 626-2778 <small>Date Daytime Phone #</small>
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