

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35455

FILED
Apr 15, 2009
Secretary of State

Entity Name: PALM ISLAND MAINTENANCE ASSOCIATION, INC.

Current Principal Place of Business:

1495 NORTH PARK DR
WESTON, FL 33326 US

New Principal Place of Business:

Current Mailing Address:

1495 NORTH PARK DR
WESTON, FL 33326 US

New Mailing Address:

FEI Number: 65-0164754

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAKALAR & EICHNER, P.A.
150 S PINE ISLAND RD
SUITE 540
PLANTATION, FL 333242669 US

Name and Address of New Registered Agent:

BAKALAR & EICHNER, P.A.
150 S PINE ISLAND RD
SUITE 540
PLANTATION, FL 33324 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:

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SOLOFF, STACEY
Address: 1495 NORTH PARK DRIVE
City-St-Zip: WESTON, FL 33326

Title: VPTD () Delete
Name: RASSNER, GLENN
Address: 1495 NORTH PARK DRIVE
City-St-Zip: WESTON, FL 33326

Title: SD () Delete
Name: SALZMAN, TERRENCE
Address: 1495 N. PARK DR
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: SOLOFF, STACEY
Address: 1495 NORTH PARK DRIVE
City-St-Zip: WESTON, FL 33326

Title: PD (X) Change () Addition
Name: RASSNER, GLENN
Address: 1495 NORTH PARK DRIVE
City-St-Zip: WESTON, FL 33326

Title: TSD (X) Change () Addition
Name: SALZMAN, TERRENCE
Address: 1495 N. PARK DR
City-St-Zip: WESTON, FL 33326

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: GLENN RASSNER

PRES

04/15/2009

Electronic Signature of Signing Officer or Director

Date