

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35763

FILED
Mar 06, 2009
Secretary of State

Entity Name: PALMA CEIA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

% FAREED OSSI
1810 S. MACDILL AVE.
TAMPA, FL 336295901

New Principal Place of Business:

% FAREED OSSI
1810 S. MACDILL AVE.
TAMPA, FL 33629

Current Mailing Address:

% FAREED OSSI
1810 S. MACDILL AVE.
TAMPA, FL 336295901

New Mailing Address:

% FAREED OSSI
1810 S. MACDILL AVE.
TAMPA, FL 33629

FEI Number: 59-2992296

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OSSI, FAREED
1810 S. MACDILL AVE.
TAMPA, FL 33629 US

Name and Address of New Registered Agent:

OSSI, FAREED T PD
1810 S. MACDILL AVE.
TAMPA, FL 33629 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: FAREED T. OSSI

03/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: OSSI, FAREED
Address: 1903 S MACDILL AVE UNIT A
City-St-Zip: TAMPA, FL 33629

Title: D () Delete
Name: GORDON, FINCH
Address: 1903 S. MACDILL AVE., UNIT C
City-St-Zip: TAMPA, FL 33629

Title: TD () Delete
Name: ROBBINS, JEROME
Address: 1903 S. MACDILL AVE UNIT B
City-St-Zip: TAMPA, FL 33629

Title: D (X) Delete
Name: HOWELL, THOMAS G
Address: 1903 S. MACDILL AVE. UNIT D
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: OSSI, FAREED
Address: 1903 S. MACDILL AVE., UNIT A
City-St-Zip: TAMPA, FL 33629

Title: TD (X) Change () Addition
Name: ROBBINS, JEROME
Address: 1903 S. MACDILL AVE., UNIT B
City-St-Zip: TAMPA, FL 33629

Title: D (X) Change () Addition
Name: FINCH, GORDON
Address: 1903 S. MACDILL AVE., UNIT C
City-St-Zip: TAMPA, FL 33629

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

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: FAREED T. OSSI

PD

03/06/2009

Electronic Signature of Signing Officer or Director

Date