2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37663

FILED Mar 26, 2009 Secretary of State

Entity Name: THE 2770 SOUTH OCEAN BOULEVARD CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 2770 S OCEAN BLVD PALM BEACH, FL 33480 **Current Mailing Address: New Mailing Address:** 2770 S OCEAN BLVD PALM BEACH, FL 33480 FEI Number: 65-0206927 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HALLE, ALBERT 2770 S. OCEAN BLVD M-1 PALM BEACH, FL 33480 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MCDONALD, TIMOTHY Name: Name: 2770 S. OCEAN BLV S201 Address: Address: City-St-Zip: PALM BEACH, FL 33480 US City-St-Zip: Title: () Delete Title: () Change () Addition HELLER, GERALD Name: Name: Address: 2770 S. OCEAN BLVD N501 Address: City-St-Zip: PALM BEACH, FL 33480 US City-St-Zip: Title: () Delete Title: () Change () Addition LASSEN, SIDNEY Name: Name: 2770 S. OCEAN BLVD. S203 Address: Address: City-St-Zip: PALM BEACH, FL 33480 US City-St-Zip: Title: VΡ () Delete Title: () Change () Addition SUSSMAN, JOHN R Name: Name: 2770 S. OCEAN BLVD. S303 Address: Address: City-St-Zip: PALM BEACH, FL 33480 US City-St-Zip: Title: () Delete Title: () Change () Addition GILBERG, GERALD M Name: Name: 2770 S OCEAN BLVD S202 Address: Address: City-St-Zip: PALM BEACH, FL 33480 US City-St-Zip: Title: () Delete Title: () Change () Addition SHECHTMAN, IRWIN Name: Name: Address: 2770 S. OCEAN BLVD S501 Address: PALM BEACH, FL 33480 US City-St-Zip: 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: TIMOTHY MCDONALD S 03/26/2009