2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2009
Secretary of State

DOCUMENT# N41928

Entity Name: NORWICH D CONDOMINIUM ASSOCIATION INCORPORATION

Current Principal Place of Business:

75 NORWICH D
CENTURY VILLAGE
WEST PALM BEACH, FL 33417

New Principal Place of Business:

Current Mailing Address:

75 NORWICH D
CENTURY VILLAGE
WEST PALM BEACH, FL 33417

New Mailing Address:

FEI Number: 59-2043104 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COLLINS, STANLEY
NORWICH D 75
CENTURY VILLAGE
WEST PALM BEACH, FL 33417 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:	D	( ) Delete
Name:	EISNER, BETIROSE	
Address:	80 NORWICH	
City-St-Zip:	WEST PALM BEACH, FL	
Title:	D	( ) Delete
Name:	COLLINS, STANLEY,	
Address:	NORWICH D 75	
City-St-Zip:	WEST PALM BEACH, FL	
Title:	D	( ) Delete
Name:	GLASSER, DOROTHY	
Address:	NORWICH D-84	
City-St-Zip:	WEST PALM BEACH, FL	
Title:	D	( ) Delete
Name:	MISHKIND, LARRY	
Address:	NORWICH D-79	
City-St-Zip:	WEST PALM BEACH, FL	
Title:	D	( ) Delete
Name:	TASSONE, SUSAN	
Address:	NORWICH D-88	
City-St-Zip:	WEST PALM BCH, FL	
Title:	D	(X) Delete
Name:	BENINCASA, GINA	
Address:	NORWICH D-90	
City-St-Zip:	WEST PALM BCH., FL	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	PRES	(X) Change ( ) Addition
Name:	EISNER, BETIROSE	
Address:	80 NORWICH	
City-St-Zip:	WEST PALM BEACH, FL	
Title:	T	(X) Change ( ) Addition
Name:	COLLINS, STANLEY,	
Address:	NORWICH D 75	
City-St-Zip:	WEST PALM BEACH, FL	
Title:	VP	(X) Change ( ) Addition
Name:	MISHKIND, IRIS	
Address:	NORWICH D-84	
City-St-Zip:	WEST PALM BEACH, FL	
Title:	PRES	(X) Change ( ) Addition
Name:	MISHKIND, LARRY	
Address:	NORWICH D 79	
City-St-Zip:	WEST PALM BEACH, FL	
Title:	S	(X) Change ( ) Addition
Name:	HOFFMAN, NATHALIE	
Address:	NORWICH D-95	
City-St-Zip:	WEST PALM BCH, FL	
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: STANLEY COLLINS T 03/01/2009

Electronic Signature of Signing Officer or Director — Date