2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000712

Entity Name: PALM ISLES WEST ASSOCIATION, INC.

FILED Apr 29, 2010 Secretary of State

Certificate of Status Desired ()

04/29/2010

Current Principal Place of Business:

J.A.N. PROPERTY MANAGEMENT, INC. 123 N. CONGRESS AVE #132

BOYNTON BEACH, FL 33426

Current Mailing Address:

J.A.N. PROPERTY MANAGEMENT, INC. 123 N. CONGRESS AVE #132

Name and Address of Current Registered Agent:

BOYNTON BEACH, FL 33426

BOYNTON BEACH, FL 33437

FEI Number: 65-0615764

FEI Number Applied For ()

US

FEI Number Not Applicable ()

.. ()

New Principal Place of Business:

123 N. CONGRESS AVE #343

BOYNTON BEACH, FL 33426

123 N. CONGRESS AVE #343

BOYNTON BEACH, FL 33426

New Mailing Address:

J.A.N. PROPERTY MANAGEMENT, INC.

J.A.N. PROPERTY MANAGEMENT, INC.

Name and Address of New Registered Agent:

MYLAN, DIONALD
9815 ARBOR VIEW DRIVE S.
9815 ARBOR VIEW

9815 ARBOR VIEW DRIVE S.

BOYNTON BEACH, FL 33437 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: DONALD MYLAN

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: MYLAN, DONALD

Address: 9815 ARBORVIEW DR SOUTH City-St-Zip: BOYNTON BEACH, FL 33437

Title: SD

Name: ROSEN, EDWARD

Address: 4519 CRESCENTVIEW DRIVE City-St-Zip: BOYNTON BEACH, FL 33437

Title:

Name: LANGENTHAL, HOWARD

Address: 9587 ARBOR VIEW DRIVE NORTH City-St-Zip: BOYNTON BEACH, FL 33437

Title: [

Name: STEIN, JOE

Address: 9743 ARBOR VIEW DR. N City-St-Zip: BOYNTON BEACH, FL 33437

Title: [

Name: BUZZI, KEN

Address: 9799 CRESCENTVIEW DR. SOUTH City-St-Zip: BOYNTON BEACH, FL 33437

Title: VPD

Name: CANDIOTTI, MAX

Address: 9767 CRESCENT VEW DR SOUTH City-St-Zip: BOYNTON BEACH, FL 33437

I hereby 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 all other like empowered.

SIGNATURE: DON MYLAN P 04/29/2010