

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004830

FILED  
Jan 19, 2009  
Secretary of State

**Entity Name:** THE PALMS 2100 MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

2100 N OCEAN BLVD  
FT LAUDERDALE, FL 33305

**New Principal Place of Business:**

**Current Mailing Address:**

2100 N OCEAN BLVD  
FT LAUDERDALE, FL 33305

**New Mailing Address:**

**FEI Number:** 65-0862163

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HYMAN, SPECTOR & MARS, PA  
150 WEST FLAGLER STREET  
TWENTY SEVENTH FLOOR  
MIAMI, FL 33130 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: TD ( ) Delete  
Name: HEESELS, PAT  
Address: 2100 N OCEAN BLVD  
City-St-Zip: FORT LAUDERDALE, FL 33305

Title: S ( ) Delete  
Name: BACH, JOAN  
Address: 2110 N OCEAN BLVD  
City-St-Zip: FORT LAUDERDALE, FL 33305

Title: D ( ) Delete  
Name: PRORRESTI, LYNN  
Address: 2100 N OCEAN BLVD  
City-St-Zip: FORT LAUDERDALE, FL 33305

Title: PD ( ) Delete  
Name: GNATT, HOWARD  
Address: 2110 N. OCEAN BLVD. #1801  
City-St-Zip: FORT LAUDERDALE, FL 33305

Title: VP ( ) Delete  
Name: BATTOO, NIKOLAI  
Address: P.O. BOX 254  
City-St-Zip: FT LAUDERDALE, FL 33305

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: S (X) Change ( ) Addition  
Name: PRONESTI, LYNN  
Address: 2100 N OCEAN BLVD  
City-St-Zip: FORT LAUDERDALE, FL 33305

Title: D (X) Change ( ) Addition  
Name: ROSSO, HOWARD  
Address: 2110 N OCEAN BLVD #23D  
City-St-Zip: FORT LAUDERDALE, FL 33305

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

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: MICHAEL CAPPS, PROPERTY MANAGER

CAM

01/19/2009

Electronic Signature of Signing Officer or Director

Date