

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000346

FILED
Mar 11, 2009
Secretary of State

Entity Name: SEASONAL PALM ISLANDERS, INC.

Current Principal Place of Business:

9769 SEACREST CIRCLE
#101
BOYNTON BEACH, FL 33437

New Principal Place of Business:

Current Mailing Address:

9769 SEACREST CIRCLE
#101
BOYNTON BEACH, FL 33437

New Mailing Address:

FEI Number: 65-0901029

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHEN, SYLVIA
9769 SEACREST CIRCLE # 101
BOYNTON BEACH, FL 33437 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: P () Delete
Name: EPSTEIN, HARVEY
Address: 9784A SUMMERBROOK TERR
City-St-Zip: BOYNTON BEACH, FL 33437

Title: T () Delete
Name: COHEN, SYLVIA
Address: 9769 SEACREST CIR 101
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D () Delete
Name: HARROW, ROSALIE
Address: 9613 SHADYBROOK DRIVE 202
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D () Delete
Name: SCHNEIDER, LEAH
Address: 9951 SEACREST CIRCLE #101
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D () Delete
Name: STEINBERG, HAROLD
Address: 7171 SUMMER TREE DR
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D () Delete
Name: MARDER, MIRIAM
Address: 7622 SEAFARM CT
City-St-Zip: BOYNTON BEACH, FL 33437

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MARDER, MIRIAM
Address: 7622 SEAFOAM COURT
City-St-Zip: BOYNTON BEACH, FL 33437

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

Title: D (X) Change () Addition
Name: HARROW, ROSALIE
Address: 9613 SHADYBROOK DRIVE #202
City-St-Zip: BOYNTON BEACH, FL 33437

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

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

Title: V (X) Change () Addition
Name: WALDMAN, MOLLIE
Address: 9907 HARBOUR LAKE CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437

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: SYLVIA Z. COHEN

T

03/11/2009

Electronic Signature of Signing Officer or Director

Date