

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000346

FILED
Jan 10, 2012
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
Name: MARDER, MIRIAM
Address: 7622 SEAFOAM COURT
City-St-Zip: BOYNTON BEACH, FL 33437

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

Title: D
Name: BALGLEY, PAULA
Address: 7742 SPRINGWATER PL
City-St-Zip: BOYNTON BEACH, FL 33437

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

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

Title: D
Name: WALDMAN, MOLLIE
Address: 9907 HARBOUR LAKE CIRCLE
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: SYLVIA COHEN

T

01/10/2012

Electronic Signature of Signing Officer or Director

Date