

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755272

Entity Name: PALM BEACH HOTEL CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**235 SUNRISE AVE
PALM BEACH, FL 33480-3812**Current Mailing Address:**235 SUNRISE AVE
PALM BEACH, FL 33480-3812 US**FEI Number:** 59-2071128**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SRKLD, INC.
201 ALHAMBRA CIRCLE
1102
CORAL GABLES, FL 33177 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	VP
Name	COHEN, STEVE
Address	235 SUNRISE AVE
City-State-Zip:	PALM BEACH FL 33480-3812

Title	SECRETARY
Name	CRISCIONE, JANELLE
Address	235 SUNRISE AVE
City-State-Zip:	PALM BEACH FL 33480

Title	TREASURER
Name	PALLAS, SHAY
Address	235 SUNRISE AVE 1050
City-State-Zip:	PALM BEACH FL 33480-3812

Title	PRESIDENT
Name	MCCUNE, MAURA
Address	320 MANGO PROMENADE
City-State-Zip:	WEST PALM BEACH FL 33401

Title	DIRECTOR
Name	CARDELUS, ANNIE
Address	6 COMMODORE AVE
City-State-Zip:	RYE NY 10580

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: MAURA MCCUNE

PRESIDENT

03/29/2017

Electronic Signature of Signing Officer/Director Detail_____
Date