Entity Name: FLAGLER POINTE CONDOMINIUM ASSOCIATION OF WPB, INC.				Secretary of State 3754004053CC
Current Prin	cipal Place of Business:			373400403366
1801 N. FLAGL	ER DR.			
WEST PALM BI	EACH, FL 33407			
Current Mai	ling Address:			
1801 N. FLA				
WEST PALM	1 BEACH, FL 33407 US			
FEI Number: 02-0694238		Certificate of Status Desired: No		
Name and A	ddress of Current Registered Agent:			
	ROLE Y BLVD.SUITE#220 .CH, FL 33426 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.				
The above named	l entity submits this statement for the purpose of changing its regis	tered office or regis	tered agent, or both,	in the State of Florida.
	l entity submits this statement for the purpose of changing its regis CAROLE ARONSON	tered office or regis	tered agent, or both,	in the State of Florida. 04/22/2023
		tered office or regis	tered agent, or both,	
	CAROLE ARONSON Electronic Signature of Registered Agent	tered office or regis	tered agent, or both,	04/22/2023
SIGNATURE	CAROLE ARONSON Electronic Signature of Registered Agent	tered office or regis	VP	04/22/2023
SIGNATURE	CAROLE ARONSON Electronic Signature of Registered Agent ctor Detail :			04/22/2023 Date
SIGNATURE Officer/Direc Title	CAROLE ARONSON Electronic Signature of Registered Agent Ctor Detail : PRESIDENT	Title	VP	04/22/2023 Date
SIGNATURE Officer/Direc Title Name Address	CAROLE ARONSON Electronic Signature of Registered Agent Ctor Detail : PRESIDENT DALY, PAMELA	Title Name	VP MEADE, CAROL 1801 N. FLAGLE	04/22/2023 Date
SIGNATURE Officer/Direc Title Name Address	CAROLE ARONSON Electronic Signature of Registered Agent Ctor Detail : PRESIDENT DALY, PAMELA 1801 N. FLAGLER DRIVE #817	Title Name Address	VP MEADE, CAROL 1801 N. FLAGLE	04/22/2023 Date
SIGNATURE Officer/Direc Title Name Address City-State-Zip:	CAROLE ARONSON Electronic Signature of Registered Agent Ctor Detail : PRESIDENT DALY, PAMELA 1801 N. FLAGLER DRIVE #817 WEST PALM BEACH FL 33407 SECRETARY	Title Name Address City-State-Zip:	VP MEADE, CAROL 1801 N. FLAGLE WEST PALM BE	04/22/2023 Date E R DRIVE #307 ACH FL 33407
SIGNATURE Officer/Direct Title Name Address City-State-Zip: Title Name	Electronic Signature of Registered Agent Electronic Signature of Registered Agent Ctor Detail : PRESIDENT DALY, PAMELA 1801 N. FLAGLER DRIVE #817 WEST PALM BEACH FL 33407 SECRETARY CABECEIRAS, KEITH	Title Name Address City-State-Zip: Title	VP MEADE, CAROL 1801 N. FLAGLE WEST PALM BE TREASURER	04/22/2023 Date E R DRIVE #307 ACH FL 33407
SIGNATURE Officer/Direc Title Name Address City-State-Zip: Title Name Address	Electronic Signature of Registered Agent Electronic Signature of Registered Agent Ctor Detail : PRESIDENT DALY, PAMELA 1801 N. FLAGLER DRIVE #817 WEST PALM BEACH FL 33407 SECRETARY CABECEIRAS, KEITH 1801 N. FLAGLER DRIVE #130	Title Name Address City-State-Zip: Title Name	VP MEADE, CAROL 1801 N. FLAGLE WEST PALM BE TREASURER MILLIMAN, BRU 1801 N. FLAGLE	04/22/2023 Date R DRIVE #307 ACH FL 33407 CE R DRIVE #710
SIGNATURE Officer/Direct Title Name Address City-State-Zip: Title Name	Electronic Signature of Registered Agent Electronic Signature of Registered Agent Ctor Detail : PRESIDENT DALY, PAMELA 1801 N. FLAGLER DRIVE #817 WEST PALM BEACH FL 33407 SECRETARY CABECEIRAS, KEITH 1801 N. FLAGLER DRIVE #130	Title Name Address City-State-Zip: Title Name Address	VP MEADE, CAROL 1801 N. FLAGLE WEST PALM BE TREASURER MILLIMAN, BRU 1801 N. FLAGLE	04/22/2023 Date R DRIVE #307 ACH FL 33407 CE R DRIVE #710

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003938

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: PAMELA DALY

CONWAY, THOMAS

City-State-Zip: WEST PALM BEACH FL 33407

1801 N. FLAGLER DRIVE #314

Name

Address

Electronic Signature of Signing Officer/Director Detail

04/22/2023 Date

FILED Apr 22, 2023