I hereby certify that the information indicated on this report or supplemental report is true and accurate and that m oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report	
above, or on an attachment with all other like empowered.	

#### oath; above

# SIGNATURE: LOUIS J. RASO

PRESIDENT

## 01/18/2023

Date

City-State-Zip: JUPITER FL 33477

Electronic Signature of Signing Officer/Director Detail

cer/Director Detail :							
	PD	Title	SD				
е	RASO, LOUIS J DR.	Name	DRISCOLL,				
ess	2141 S ALTERNATE A1-A SUITE 110	Address	2141 S ALT SUITE 100				
State-Zip:	JUPITER FL 33477	City-State-Zip:	JUPITER F				

#### 824 W. INDIANTOWN ROAD JUPITER, FL 33458 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

## Offic

Title	PD	Title	SD				
Name	RASO, LOUIS J DR.	Name	DRISCOLL, THOMAS				
Address	2141 S ALTERNATE A1-A SUITE 110	Address	2141 S ALTERNATE A1-A SUITE 100				
City-State-Zip:	JUPITER FL 33477	City-State-Zip:	JUPITER FL 33477				
Title	VPD						
Name	DAVENPORT, MARY						
Address	2151 S. ALTERNATE A-1-A, SUITE 2000						

**Current Principal Place of Business:** 

Entity Name: THREE PALMS CENTER CONDOMINIUM ASSOCIATION, INC.

2141 S ALTERNATE A1-A SUITE 100 JUPITER, FL 33477

#### **Current Mailing Address:**

SUITE 100

2141 S ALTERNATE A1-A JUPITER, FL 33477 US

#### FEI Number: 54-2177756

FLORIDA ASSOCIATION ATTORNEYS

### Name and Address of Current Registered Agent:

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N0500006607

FILED Jan 18, 2023 Secretary of State 0377395239CC

Certificate of Status Desired: No

Date