2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2015
Secretary of State
CC8527214649

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Entity Name: THE PALM CLUB WEST VILLAGE I CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4227 NORTHLAKE BLVD
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

4227 NORTHLAKE BLVD
PALM BEACH GARDENS, FL 33410 US

FEI Number: 59-2534805

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SEA BREEZE CMS. INC
4227 NORTHLAKE BLVD
PALM BEACH GARDENS, FL 33410 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: BEVERLEY JAMASON 02/26/2015

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	VP, DIRECTOR
Name	DEDRICK, ROBERT
Address	4227 NORTHLAKE BLVD
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	PRESIDENT, DIRECTOR
Name	LANDERMAN, NORMAN
Address	4227 NORTHLAKE BLVD
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	DIRECTOR
Name	WELLY, THOMAS
Address	4227 NORTHLAKE BLVD
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	SECRETARY, DIRECTOR
Name	WILLIAMS, JOY
Address	4227 NORTHLAKE BLVD
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	TREASURER, DIRECTOR
Name	GORFIDO, JEFFREY
Address	4227 NORTHLAKE BLVD
City-State-Zip:	PALM BEACH GARDENS FL 33410

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: NORMAN LANDERMAN PRESIDENT 02/26/2015

Electronic Signature of Signing Officer/Director Detail — Date