

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05166

**Entity Name:** PALM-TAFT PROFESSIONAL BUILDING CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 29, 2016**  
**Secretary of State**  
**CC1148334792**

**Current Principal Place of Business:**

1601 N. PALM AVE.  
SUITE 212  
PEMBROKE PINES, FL 33026

**Current Mailing Address:**

1601 N PALM AVE., SUITE 212  
C/O JOHN D GENTILE, CPA  
PEMBROKE PINES, FL 33026

**FEI Number: 59-2648438**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

GENTILE, JOHN  
1601 N. PALM AVE.  
STE 212  
PEMBROKE PINES, FL 33026 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           PTD  
Name           GENTILE, JOHN D  
Address        1601 N PALM AVE., SUITE 212  
City-State-Zip: PEMBROKE PINES FL 33026

Title           SECRETARY  
Name           MAUTNER, MARK  
Address        1601 N. PALM AVE., SUITE 104  
City-State-Zip: PEMBROKE PINES FL 33026

Title           VP  
Name           PRICE, DAVID  
Address        1601 N PALM AVE, SUITE 109  
City-State-Zip: PEMBROKE PINES FL 33026

*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: JOHN D GENTILE**

**PRESIDENT**

**04/29/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date