

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000006311

**Entity Name:** PALM BEACH PLACE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1780 WINDORAH WAY  
WEST PALM BEACH, FL 33411

**Current Mailing Address:**

C/O GRS MGMT ASSOCIATES INC  
3900 WOODLAKE BLVD SUITE 309  
LAKE WORTH , FL 33463 US

**FEI Number:** 20-5193153

**Certificate of Status Desired:** No

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

WYANT-CORTEZ & CORTEZ, PA  
840 US HIGHWAY 1  
SUITE 345  
NORTH PALM BEACH, FL 33408 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:** LARRY CORTEZ

01/23/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name PRESSEY, CATHY  
Address C/O GRS MGMT ASSOCIATES INC  
3900 WOODLAKE BLVD SUITE 309  
City-State-Zip: LAKE WORTH FL 33463

Title SD  
Name HORNE, JILL  
Address C/O GRS MGMT ASSOCIATES INC  
3900 WOODLAKE BLVD SUITE 309  
City-State-Zip: LAKE WORTH FL 33463

Title TD  
Name GRAY, LOIS  
Address C/O GRS MGMT ASSOCIATES INC  
3900 WOODLAKE BLVD SUITE 309  
City-State-Zip: LAKE WORTH FL 33463

Title DIRECTOR  
Name MORELLO, JOE  
Address C/O GRS MGMT ASSOCIATES INC  
3900 WOODLAKE BLVD SUITE 309  
City-State-Zip: LAKE WORTH FL 33463

Title PRESIDENT  
Name PRESSY , CATHY  
Address C/O GRS MGMT ASSOCIATES INC  
3900 WOODLAKE BLVD SUITE 309  
City-State-Zip: LAKE WORTH FL 33463

*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:** PRESSEY , CATHY

PRESIDENT

01/23/2017

Electronic Signature of Signing Officer/Director Detail

Date