

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004830

Entity Name: THE PALMS 2100 MASTER ASSOCIATION, INC.**Current Principal Place of Business:**2100 N OCEAN BLVD
FT LAUDERDALE, FL 33305**Current Mailing Address:**2100 N OCEAN BLVD
FT LAUDERDALE, FL 33305**FEI Number: 65-0862163****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**GERSTIN, JOSHUA
40 S.E. 5TH STREET
SUITE 610
BOCA RATON, FL 33432 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	TD
Name	CAIN, JAMES
Address	2100 N OCEAN BLVD
City-State-Zip:	FORT LAUDERDALE FL 33305

Title	VD
Name	COPPOLA, ERIC
Address	2100 N OCEAN BLVD
City-State-Zip:	FORT LAUDERDALE FL 33305

Title	SD
Name	MATESIC, DAVID
Address	2110 N OCEAN BLVD #31A
City-State-Zip:	FORT LAUDERDALE FL 33305

Title	PD
Name	MOORS, KENT
Address	2110 N. OCEAN BLVD. #1801
City-State-Zip:	FORT LAUDERDALE FL 33305

Title	D
Name	MARKS, DANETTE
Address	2170 N OCEAN BLVD
City-State-Zip:	FT LAUDERDALE FL 33305

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: KENT MOORS**PRESIDENT****01/18/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date