CONDOMINIUM ASSOCIATION INFORMATION UPDATE FORM

All information provided is public information. Changes are to be made by an officer of the condominium association. Please use a typewriter or print legibly in black ink.

Submit completed form to: DCCA - P&VLD

Real Estate Commission

335 Merchant Street, Room 333

Honolulu, HI 96813

Name of Condominium Association: AOAO PALMS AT WAIKIKI			Registration #:
The information provided on this form is current as of March previously provided to the Real Estate Commission ("Commis	7, 202 sion").	4	and replaces the information
Please indicate the change being reported:			
Names and positions of the officers of the association (Preside Henry Perez - President			urer required): es - Director
			51100101
Ernie Juan - Treasurer			
Robin Harlow - Secretary			
Designated officer of the association who can be contacted directly			
Name: Henry Perez	Title:	Presiden	t
Officers Public Address: 955 Kaipuhaa Place Honolulu, HI	96825	- 	
Email: perezhgvc@aol.com	Telepho	one Number:	(808) 927-3449
Management status: (Check ONE only and fill in corresponding	g informa	ition)	
Self-managed by the Association of Unit Owners (AOUO)			DECEIVED
Name of Manager:	Title:		MAY 0 5 2024
Address:			REC - DCCA
Email Address:		hone Number	the State of the control of the state of the
Managed by Condominium Managing Agent			7 4
Name: Aqua-Aston Hospitality, LLC	RBL	icense Numbe	r
Contact Person: Bobbie Favela	Title:	VP, Condomi	inium Administration
Aqui, 200 820 Mililani Street, Suuite 600, Honolulu, HI	96813		
Einail Addiage bobbie.favela@aquaaston.com	Telep	none Number	(808) 937-1438
Contact designation (individual) to receive all AOUO correspon Commission: (if different from above)	idence (e	xcept bulletins) and telephone calls from the
Name of Manager:	Title:		
Address:			
Email Address:	Telep	hone Number	

Name:	Telephone No.:
Title:	
Alternate Name:	Telephone No.:
Title:	
	orm on behalf of this condominium association, and that the information
ertify that I am authorized to sign this ovided is true and correct.	orm on behalf of this condominium association, and that the information
ertify that I am authorized to sign this ovided is true and correct.	orm on behalf of this condominium association, and that the information
ertify that I am authorized to sign this ovided is true and correct. Signature of association	

