## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 27 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

CITY-ST-ZIP

SIGNATURE:

733618

(3)

THE PALM CLUB ASSOCIATION, INC.

Principal Place of Business Mailing Address 43 - 100 CLUB HOUSE DRIVE 43 - 100 CLUB HOUSE DRIVE PALM COAST FL 32037 PALM COAST FL 32037 3. Date Incorporated or Qualified 3a. Date of Last Report 08/19/1975 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1742430 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζıp Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 ER.OLD STRADER, MARC 82 ddress (P.O. Box Number is Not Acceptable 29 OLD KINGS RD N OUTH 83 SUITE 1B PALM COAST FL 32137 City South Zip Code 32119 84 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE. Signature, typed or p (NOTE: Registered Agent alguature required when reinstating) of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13, **X** DELETE Change TITLE 1.1 TITLE BILL BOCKHIND DARLENE OTLEY NAME 1.2 NAME 50 CLUBHOUSE DRIVE # 203 40 CLUB HOUSE DR UNIT 103 STREET ADDRESS 1.3 STREET ADDRESS PAUN COAST FL 32137 PALM COAST FL CHTY-ST-ZIE 1.4 CITY - ST- ZIP DELETE Change 2.1 TITLE TITLE GEORGE BAKER **ED DELANEY** NAME 2.2 NAME 42 CLUBHOUSE DEIVE # 206 42-101 CLUB HOUSE DR STREET ADDRESS 2.3 STREET ADDRESS PALM COAST FL PALM COAST FL 32137 CHY-ST-ZIP 2.4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE X Addition ROBERT PERRY MARIE QUAGLIANO NAME 3.2 NAME 4BCLUBHOUSE DRIVE #203 50 CLUB HORSE DR UNIT 208 STREET ADDRESS 3.3 STREET ADDRESS PALM COAST FL PAUM COAST FL 32137 CITY-ST-ZIP 3.4. CITY-SF-ZIP DELETE HSST TEERSORER/SECRETARY Change THUE 4.1 TITLE Addition **GEORGE BAKER** NAME 4.2 NAME ALLEN STANWIX 46 CLUBHOUSE DRIVE 4108 42 CLUB HOUSE DR UNIT 206 STREET ADDRESS 4.3 STREET ADDRESS PALM COAST FL PALM COAST FL CITY-ST-ZIP 4.4 CITY - ST - ZIP ☐ Change DELETE TITLE DATD 5.1 TITLE Addition **BILL BOCCHINO** NAME 5.2 NAME 50 CLUB HOUSE DR UNIT 203 STREET ADDRESS 5.3 STREET ADDRESS PALM COAST FL CITY - ST - ZIP 5.4 CITY-ST-ZIP Change Title DELETE 6.1 TITLE \_\_\_ Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.