2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 11, 2007
Secretary of State

DOCUMENT# 749233

Entity Name: PALMETTO POINT ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 8502
FT. MYERS, FL 33908

New Principal Place of Business:

4830 LAUREL LANE
FT. MYERS, FL 33908

Current Mailing Address:

PO BOX 8502
FT. MYERS, FL 33908

New Mailing Address:

4830 LAUREL LANE
FT. MYERS, FL 33908

FEI Number: 59-1981012 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

RODGERS, JIMMY
4830 LAUREL LN
FT MYERS, FL 33908 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: S ( ) Delete
Name: KEYS, CAROLINE
Address: 4805 LAUREL LN
City-St-Zip: FORT MYERS, FL 33908

Title: DT ( ) Delete
Name: TRUAX, BILL
Address: 6528 DANIEL CT.
City-St-Zip: FORT MYERS, FL 33908

Title: T ( ) Delete
Name: RODGERS, JIMMY
Address: 4830 LAUREL LANE
City-St-Zip: FT. MYERS, FL 33908

Title: VP ( ) Delete
Name: DEPREE, CHERI
Address: 4821 GRIFFIN BLVD
City-St-Zip: FORT MYERS, FL 33908

Title: P ( ) Delete
Name: COLLINS, CHRISTIN
Address: 6458 GRIFFEN BLVD.
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DT (X) Change ( ) Addition
Name: COWART, RICHARD
Address: 6757 DANAH CT
City-St-Zip: FORT MYERS, FL 33908

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JIMMY RODGERS S 08/11/2007
Electronic Signature of Signing Officer or Director Date