FILE NOW: FILING FEE AFTER MAY 1ST $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 17 PM 4:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **768258** **(6)**

1. Corporation Name

THE PALMS MOBILE HOMEOWNER'S ASSOCIATION, INC.

MARTIN THIELE - SECRETARY

Principal Place of Business
~~169 RICHARD ST~~ 131 ALISA, DR
~~141 EDWARD DRIVE~~
SEBASTIAN FL 32958-2813

Mailing Address
~~141 EDWARD DRIVE~~
SEBASTIAN FL 32958-2813

WISPERING PALMS MOBILE HOME PARK

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/03/1983
3a. Date of Last Report: 04/27/1994

4. FEI Number: 59-2350690 ☐ Applied For ☐ Not Applicable

	2. Principal Place of Business	2a. Mailing Address
Suite, Apt. #, etc	21 131 ALISA DR	26 121 ALISA DR
City & State	22 SEBASTIAN, FLA	27
Zip / Country	23	28 SEBASTIAN, FL
	24 32958 / 25 INDIAN RIVER	29 32958 / 30

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required

8. The corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

~~RAMSEY, BILL~~
~~141 EDWARD DRIVE~~
SEBASTIAN FL 32958

MARTIN THIELE
131 ALISA DR

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Martin E Thiele MARTIN THIELE 4/7/95
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE		11 TITLE	DIRECTOR	☑ Change ☐ Addition
NAME	RAMSEY, BILL	12 NAME		
STREET ADDRESS	141 EDWARD DRIVE	13 STREET ADDRESS		
CITY ST ZIP	SEBASTIAN FL	14 CITY ST ZIP		
TITLE	S	21 TITLE	SECRETARY	☑ Change ☐ Addition
NAME	THIELE, MARTIN	22 NAME		
STREET ADDRESS	131 ALISA DR	23 STREET ADDRESS		
CITY ST ZIP	SEBASTIAN FL	24 CITY ST ZIP		
TITLE	P	31 TITLE	PRESIDENT	☑ Change ☐ Addition
NAME	COMPTON, ART	32 NAME		
STREET ADDRESS	163 RICHARD ST	33 STREET ADDRESS		
CITY ST ZIP	SEBASTIAN FL	34 CITY ST ZIP		
TITLE	D	41 TITLE	DIRECTOR	☐ Change ☐ Addition
NAME	WINTER, PETE	42 NAME		
STREET ADDRESS	66 PHYLLIS DR.	43 STREET ADDRESS		
CITY ST ZIP	SEBASTIAN FL	44 CITY ST ZIP		
TITLE	D	51 TITLE	DIRECTOR	☐ Change ☐ Addition
NAME	~~THIELE, IRENE~~ STEVE BAUMGARTNER	52 NAME		
STREET ADDRESS	~~121 ALISA DR~~ 40 ALISA DR	53 STREET ADDRESS		
CITY ST ZIP	~~SEBASTIAN FL~~ SEBASTIAN, FL	54 CITY ST ZIP		
TITLE	T	61 TITLE	TREASURER	☑ Change ☐ Addition
NAME	MASSIE, BERNARD	62 NAME	BERNARD E MASSIE	
STREET ADDRESS	166 RICHARD STREET	63 STREET ADDRESS	166 RICHARD ST	
CITY ST ZIP	SEBASTIAN FL	64 CITY ST ZIP	SEBASTIAN, FLA 32958	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: B E Massie Sr Treasurer March 22 1995 (407) 589 6849
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #)

0034400