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CORPORATION
ANNUAL REPORT
1995



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

FILED

95 JUN 29 PM 1:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N01580 (2)**
1. Corporation Name
WOODS OF PALMA SOLA HOMEOWNERS' ASSOCIATION, INC

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
7410 SECOND AVENUE NW 7410 SECOND AVENUE NW
P. O. BOX 14062 P. O. BOX 14062
BRADENTON FL 34280-1062 BRADENTON FL 34280-1062

3. Date Incorporated or Qualified **02/21/1984** 3a. Date of Last Report **03/15/1994**
4. FEI Number **59-2477191** Applied For Not Applicable
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. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip Country 29 Country 30 Country

9. Name and Address of Current Registered Agent
**REYNOLDS, KENNETH R.
310 73RD STREET, N.W.
BRADENTON FL 34209**

10. Name and Address of New Registered Agent
B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City FL B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.0503, 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: *Kenneth R. Reynolds* DATE: **5/25/95**
(NOTE: Registered Agent signature required when transferring)

12. OFFICERS AND DIRECTORS

| | |
|-----------------|----------------------------|
| TITLE | TD |
| NAME | BILLWORTH, MELEG |
| STREET ADDRESS | 406 72ND STREET, NW |
| CITY - ST - ZIP | BRADENTON FL |
| TITLE | PD |
| NAME | PIERRO, RICHARD |
| STREET ADDRESS | 214 73RD STREET, NW |
| CITY - ST - ZIP | BRADENTON FL |
| TITLE | SD |
| NAME | STOCKTON, RON |
| STREET ADDRESS | 7201 3RD AV NW |
| CITY - ST - ZIP | BRADENTON FL |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | | |
|---------------------|-------------------------------|--|
| 1.1 TITLE | TD | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME | Kenneth Roger Reynolds | |
| 1.3 STREET ADDRESS | 310-73rd Street NW | |
| 1.4 CITY - ST - ZIP | Bradenton, FL 34209 | |
| 2.1 TITLE | PD | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME | Corvetha James | |
| 2.3 STREET ADDRESS | 305 73rd Street NW | |
| 2.4 CITY - ST - ZIP | Bradenton, FL 34209 | |
| 3.1 TITLE | D | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME | LARRY NOVAK | |
| 3.3 STREET ADDRESS | 301 - 73rd Street NW | |
| 3.4 CITY - ST - ZIP | Bradenton, FL 34209 | |
| 4.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME | | |
| 4.3 STREET ADDRESS | | |
| 4.4 CITY - ST - ZIP | | |
| 5.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME | | |
| 5.3 STREET ADDRESS | | |
| 5.4 CITY - ST - ZIP | | |
| 6.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.2 NAME | | |
| 6.3 STREET ADDRESS | | |
| 6.4 CITY - ST - ZIP | | |

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 110.07(3)(b), 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: *Roger Reynolds* DATE: **5/25/95** (813) 761-0240
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR