

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003203

FILED
Sep 04, 2007
Secretary of State

Entity Name: PALM BLUFF PRESERVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3408 BEACON ST.
POMPANO BCH, FL 33062

New Principal Place of Business:

300 PALM BLUFF STREET
CLEARWATER, FL 33755

Current Mailing Address:

3408 BEACON ST.
POMPANO BCH, FL 33062

New Mailing Address:

300 PALM BLUFF STREET
CLEARWATER, FL 33755

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

BRECO, JOHN
300 PALM BLUFF STREET
CLEARWATER, FL 33756 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: PD () Delete
Name: BRECO, JOHN
Address: 3408 BEACON ST.
City-St-Zip: POMPANO BCH, FL 33062

Title: VD () Delete
Name: WISNE, ALAN
Address: 3408 BEACON ST.
City-St-Zip: POMPANO BCH, FL 33062

Title: STD () Delete
Name: THOMPSON, MARK
Address: 3408 BEACON ST.
City-St-Zip: POMPANO BCH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MICHE SPORCK

OM

09/04/2007

Electronic Signature of Signing Officer or Director

_____ Date