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Apr 28 1997 8:00am  
 Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N17079 (7)  
 1. Corporation Name  
 THE HOMEOWNERS' ASSOCIATION OF THE PALMS, INC.

38



Principal Place of Business Mailing Address  
 VANGUARD MANAGEMENT 42228 N. 56TH STREET TAMPA FL 33617 US  
 VANGUARD MANAGEMENT 12220 N. 56TH STREET TAMPA FL 33617-4531- US

3. Date Incorporated or Qualified 10/01/1986  
 3a. Date of Last Report 03/12/1996

2. Principal Place of Business 2a. Mailing Address  
 21 8737 TEMPLE TERRACE HWY 26 8737 TEMPLE TERRACE HWY  
 Suite, Apt. #, etc. Suite, Apt. #, etc.  
 22  
 23 TEMPLE TERRACE, FL 28 TEMPLE TERRACE, FL  
 City & State City & State  
 24 33637 25 U.S. 29 33637 30 U.S.  
 Zip Country Zip Country

4. FEI Number 59-2721297 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  
 6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
 MOYER, BOB  
 12228 N 56TH ST  
 TAMPA FL 33617

10. Name and Address of New Registered Agent  
 81 Name MOYER, BOB  
 82 Street Address (P.O. Box Number is Not Acceptable) 8737 TEMPLE TERRACE HWY  
 83  
 84 City TEMPLE TERRACE FL 85 Zip Code 33637

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-stating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CICARELLO, CINDY	1.2 NAME	
STREET ADDRESS	1719 PAINT BRANCH WAY	1.3 STREET ADDRESS	
CITY-ST-ZIP	BRANDON FL 33511	1.4 CITY-ST-ZIP	
TITLE	SD	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HINGST, SHIRLEY	2.2 NAME	NANCY LESSARD
STREET ADDRESS	890 BURLWOOD ST	2.3 STREET ADDRESS	1704 PAINT BRANCH
CITY-ST-ZIP	BRANDON FL	2.4 CITY-ST-ZIP	BRANDON, FL 33511
TITLE	VPD	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WIMBERLY, ROBERT	3.2 NAME	NANCY LESSARD
STREET ADDRESS	911 BURLWOOD ST	3.3 STREET ADDRESS	SD
CITY-ST-ZIP	BRANDON FL	3.4 CITY-ST-ZIP	1704 PAINT BRANCH
TITLE	PD	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PETERSON, ELWOOD E	4.2 NAME	ANNETTE TRUJILLO
STREET ADDRESS	881 BURLWOOD STREET	4.3 STREET ADDRESS	1708 OAK BRANCH
CITY-ST-ZIP	BRANDON FL	4.4 CITY-ST-ZIP	BRANDON, FL 33511
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	OSMUL, ANTHONY	5.2 NAME	GAIL BUTLER
STREET ADDRESS	868 BURLWOOD ST	5.3 STREET ADDRESS	884 BURLWOOD
CITY-ST-ZIP	BRANDON FL	5.4 CITY-ST-ZIP	BRANDON, FL 33511
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

SIGNATURE: \_\_\_\_\_ 1667 (813) 295-3566

CR2E037 (9/96)