


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2008 8:00 am
Secretary of State

02-05-2008 90006 023 ****70.00

DOCUMENT # N17864

1. Entity Name
PALM CAY HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**C/O KENNETH KIRKPATRICK
 8888 S.W. STATE RD. 200
 OCALA, FL 34481 US**

Mailing Address
**POB 772042
 OCALA, FL 34477 US**

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country



02022008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2774085


Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
**EDGERTON, JOYCE
 8356 SW 106 ST
 OCALA, FL 34481**

7. Name and Address of New Registered Agent
 Name **Demary, Roger P.**
 Street Address (P.O. Box Number if Not Acceptable)
8306 SW 106 Place
 City **Ocala** **FL** Zip Code **34481**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  **Roger P. Demary, President** 1/31/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HOYT, RUSSELL 8344 SW 107 PL OCALA, FL 34481 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D Roger Demary 8306 SW 106 Place Ocala, FL 34481 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DEMARY, ROGER 8306 SW 108 PL OCALA, FL 34481 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D Nancy Solomon 8548 SW 105 Place Ocala, FL 34481 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KIRKPATRICK, KENNETH 8888 SW STATE RD 200 OCALA, FL 34481 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Janet Demary 8306 SW 106 Place Ocala, FL 34481 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D- DEPANTE, DOMINIC 10955 SW 76 TERRACE OCALA, FL 34476 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Harry Chambers 8189 SW 105 Place Ocala, FL 34481 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HALL, BARBARA 11281 SW 76 AVE OCALA, FL 34476 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Yvonna Stojanowski 8326 SW 107 Place Ocala, FL 34481 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DALDIN, RUTH 8415 SW 106 PL OCALA, FL 34481 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Virginia Chipman 8470 SW 107 Place Ocala, FL 34481 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Roger P. Demary** 1/31/08 352-237-2309
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

H0018054
N17864

Box 10 continued	Box 11 continued
Bergeron, Richard delete 11288 SW 78 Ave, Ocala, FL 34481	Murawski, Ada Director add 10951 SW 77 Court Ocala, FL 34476
	Kalinas, John Director add 8417 SW 106 Street Ocala, FL 34481
	Edgerton, Joyce Secretary add 8356 SW 106 Street Ocala, FL 34481