

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35381

FILED  
Mar 17, 2011  
Secretary of State

**Entity Name:** PALAMAR OAKS VILLAGE III HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1269 HANCOCK CIR  
ST. CLOUD, FL 34769 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 700762  
ST. CLOUD, FL 34770 US

**New Mailing Address:**

FEI Number: 26-0161320

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SPARKS, GARY  
1269 HANCOCK CIR  
ST. CLOUD, FL 34769 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  
Name: SPARKS, GARY  
Address: 1269 HANCOCK CIR  
City-St-Zip: SAINT CLOUD, FL 34769

Title: T  
Name: LAUER, PAUL E  
Address: 1261 HANCOCK CIR  
City-St-Zip: SAINT CLOUD, FL 34769

Title: VP  
Name: SANBORN, TIMOTHY  
Address: 1249 HANCOCK CIR  
City-St-Zip: SAINT CLOUD, FL 34769

Title: S  
Name: LAUER, PAUL E JR  
Address: 1254 HANCOCK CIR  
City-St-Zip: SAINT CLOUD, FL 34769

Title: D  
Name: BOSSELL, DON  
Address: 1221 HANCOCK CIRCLE  
City-St-Zip: SAINT CLOUD, FL 34769

I hereby 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 all other like empowered.

SIGNATURE: PAUL E. LAUER

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03/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date