2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005356

FILED Jan 10, 2006 Secretary of State

Entity Name: PALM LAKE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

PO BOX 311

WINDERMERE, FL 34786

Current Mailing Address: New Mailing Address:

PO BOX 311

WINDERMERE, FL 34786

FEI Number: 59-3284750 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WOLGEMUTH, ROBERT 8600 CRESTGATE CIRCLE ORLANDO, FL 32819 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

VPD () Delete Title: ARB (X) Change () Addition STANLEY, TIM STANLEY, TIM

 Name:
 STANLEY, TIM
 Name:
 STANLEY, TIM

 Address:
 8709 CRESTGATE CIR.
 Address:
 8709 CRESTGATE CIR.

 City-St-Zip:
 ORLANDO, FL 32819
 City-St-Zip:
 ORLANDO, FL 32819

Title: PD () Delete Title: VPD (X) Change () Addition Name: CUMMINGS, JERRY Name: DOWTY, MIKE

 Address:
 8672 CRESTGATE CIR.
 Address:
 8752 CRESTGATE CIRCLE

 City-St-Zip:
 ORLANDO, FL 32819
 City-St-Zip:
 ORLANDO, FL 32819

Title: TD () Delete Title: PD (X) Change () Addition Name: WOLGEMUTH, ROBERT WOLGEMUTH, ROBERT

 Address:
 8600 CRESTGATE CIRCLE
 Address:
 8600 CRESTGATE CIRCLE

 City-St-Zip:
 ORLANDO, FL 32819
 City-St-Zip:
 ORLANDO, FL 32819

() Delete Title: VPD Title: TD (X) Change () Addition Name: MCCLOSKEY, ADRIAN Name: MCCLOSKEY, ADRIAN 8660 CREST GATE CIRCLE 8660 CREST GATE CIRCLE Address: Address: City-St-Zip: ORLANDO, FL 32819 City-St-Zip: ORLANDO, FL 32819

Title: SD () Delete Title: SEC (X) Change () Addition

 Name:
 RYAN, BARBARA
 Name:
 RYAN, BARBARA

 Address:
 8716 CRESTGATE CIR
 Address:
 8716 CRESTGATE CIR

 City-St-Zip:
 ORLANDO, FL 32819
 City-St-Zip:
 ORLANDO, FL 32819

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT WOLGEMUTH PD 01/10/2006