

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002371

FILED
May 02, 2007
Secretary of State

Entity Name: HOME OWNERS OF PALM AIRE VILLAGE, INC.

Current Principal Place of Business:

3127 NW 68TH ST.
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

3127 NW 68TH ST.
FORT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 65-0597418 FEI Number Applied For () 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:

WIESEND, ELIZABETH
6531 NW 34TH AVE
FT.LAUDERDALE, FL 33309 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: DV () Delete
Name: DEEB, CHARLES
Address: 3161 NW 63RD STREET
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: T () Delete
Name: BRUNS, JENNIFER
Address: 3127 NW 68TH STREET
City-St-Zip: FT LAUDERDALE, FL 33309

Title: S () Delete
Name: WIESEND, ELIZABETH
Address: 6531 NW 34TH AVE
City-St-Zip: FT LAUD, FL 33309

Title: D () Delete
Name: BOISVERT, RENE
Address: 3371 NW 66TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D () Delete
Name: CALLEJO, CHARLOTTE
Address: NW 65TH DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33309

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:

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: JENNIFER BRUNS

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05/02/2007

Electronic Signature of Signing Officer or Director

_____ Date