FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9700006684

Corporation Name

PALOMINO VILLAGE HOMEOWNERS ASSOCIATION, INC.

FIRIC	ihai Li	ace or	busii
8080	PALOI	JONIN	PIVE
NADI	ES FI	24112	

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2. Principal Place of Business

Suite, Apt. #, etc.

Mailing Address

8080 PALOMINO DRIVE NAPLES FL 34113

2a. Mailing Address

Suite, Apt. #, etc.

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FILED Apr 07, 1999 8:00 am Secretary of State

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Applied For

Not Applicable

3. Date Incorporated or Qualifed

11/26/1997

65-0555287

4. FEI Number

City & State	9	City & State				5. Certifcate of S	Status Desired		\$8.75 Ad	
3		28							Fee Req	juired
Zip	Country	Zip		Country		6. Election Cam	paign Financing		\$5.00 N	•
4	25	29	30			Trust Fund C			Added to	Fees
	9. Name and Address of Current	Registered Agent				10. Name and A	ddress of New F	Registered	Agent	
				81	Name					
GREUSEL.	JAMIE R			82	Street Addr	ess (P.O. Box Numb	er is Not Accepta	able)		
	OLLIER BOULEVARD				••••					
	LAND FL 34145			83	•					
indico io	04101204140			84	City	<u> </u>	· · · ·		85 Zip Ci	ode
				04	City			FL		
office or re agent. I ar	to the provisions of Sections 617.0502 agistered agent, or both, in the State of in familiar with, and accept the obligation	Florida, Such chanc	ie was author	ized by	tne corporation	oration submits this on's board of director	statement for the	purpose of ot the appoir	changing its r ntment as reg	egistered istered
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable.	(NOTE: Regis	tered Agen	t signature require	d when reinstating)		DATE		
12.	OFFICERS AND	DIRECTORS		13.		ADDITIONS/C	HANGES TO OF	FICERS AN		
TITLE	DP	X DE	LETE	I.1 TITLE					Change	☐ Addition
NAME	STUMBO, PHILIP R	EFF. 4	· 6.29	1.2 NAME						
STREET ADDRESS:	8062 PALOMINI DRIVE		1	I.3 STREET	ADDRESS					
CITY-ST-ZIP	NAPLES FL 34113		1	I.4 CITY-S	T-ZIP		<u>. </u>	<u> </u>		
TITLE	D	☐ DE	LETE 2	2.1 TITLE					Change	☐ Addition
NAME	RUPPELT, JAMES J		1	2.2 NAME						
STREET ADDRESS	8011 PALOMINO DRIVE		1	2.3 STREET	ADDRESS					
CITY-ST-ZIP	NAPLES FL 34113			2. 4 CITY-S	IT-ZIP	_				
TITLE	DST	☐ DE	LETE	3.1 TITLE			_		Change	Addition
NAME	FANELLI, JOSEPH J JR		5	3.2 NAME					*	
STREET ADDRESS	8003 PALOMINO DRIVE			3.3 STREET	ADDRESS					
CITY-ST-ZIP	NAPLES FL 34113			3.4. CITY- S	T-ZIP					
TITLE	DV	DE	LETE 4	1.1 TITLE	1	90		,	Change	☐ Addition
NAME	SEAMAN, DORIS	•		. 2 NAME		~ 1			•	
STREET ADDRESS	8071 PALOMINO DRIVE			I.3 STREET	ADDRESS					
CITY-ST-ZIP	NAPLES FL 34113			4.4 CITY-S				•		
TITLE	DV	□ DE		5.1 TITLE					Change	☐ Addition
NAME	GALANTE, LOUIS			5.2 NAME						
STREET ADDRESS	8050 PALOMINO DRIVE] :	5.3 STREE	ADDRESS					
CITY-ST-ZIP	NAPLES FL 34113			5.4 CITY-S	T- ZIP					
TITLE	1011	DE	LETE	6.1 TITLE	 				Change	☐ Addition
NAME]	6.2 NAME						
STREET ADDRESS			.	3.3 STREET	ADDRESS					
CITY-ST-ZIP				8.4 CITY-S	T-ZIP					
LIZTASTAZIP	pertify that the information supplied with				i					

4. I 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 informatio 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 eath; 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, with a other like empowered.

SIGNATURE:

US MATURE DELIVIRAD (President)
URAD (President)

4/2/99 941-733.07S