

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -8 AM 9:51

DOCUMENT # N93000004273 (9)

1. Corporation Name

PALM VALLEY HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

160 E PALM VALLEY DRIVE
OVIEDO FL 32765

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OVIEDO FL 32765

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/16/1993	3a. Date of Last Report 02/23/1994
4. FEI Number 59-3204598	Applied For Not Applicable
5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Zip
24	25
Country	Country
29	30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

COLLING, LEE J
20 N ORANGE AVENUE
SUITE 700
ORLANDO FL 32801

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☒ Addition
NAME	MARTIN, ROBERT W	1.2 NAME	D
STREET ADDRESS	783 PHOENIX LANE	1.3 STREET ADDRESS	RICHARD LOMBARD
CITY - ST - ZIP	OVIEDO FL 32765	1.4 CITY - ST - ZIP	3870 SABAL DRIVE, OVIEDO, FL 32765
TITLE	D	2.1 TITLE	☐ Change ☒ Addition
NAME	EARLS, BETTY	2.2 NAME	D
STREET ADDRESS	307 DELRAY DRIVE	2.3 STREET ADDRESS	JAY MROOTIN
CITY - ST - ZIP	OVIEDO FL 32765	2.4 CITY - ST - ZIP	395 MONTEREY DRIVE, OVIEDO, FL 32765
TITLE	D	3.1 TITLE	☐ Change ☒ Addition
NAME	STEWART, MARY JANE	3.2 NAME	D
STREET ADDRESS	3577 PALM VALLEY CIRCLE	3.3 STREET ADDRESS	FREDA MARTIN
CITY - ST - ZIP	OVIEDO FL 32765	3.4 CITY - ST - ZIP	783 PHOENIX LANE, OVIEDO, FL 32765
TITLE	D	4.1 TITLE	☐ Change ☒ Addition
NAME	PATTERSON, SUSAN	4.2 NAME	D
STREET ADDRESS	3908 NEDDLE PALM PLACE	4.3 STREET ADDRESS	ROBERT ANDERSEN
CITY - ST - ZIP	OVIEDO FL 32765	4.4 CITY - ST - ZIP	3928 BREAKWATER DRIVE, OVIEDO, FL 32765
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	[REDACTED]	5.2 NAME	
STREET ADDRESS	[REDACTED]	5.3 STREET ADDRESS	
CITY - ST - ZIP	[REDACTED]	5.4 CITY - ST - ZIP	
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	DOUGLAS, DAVID	6.2 NAME	
STREET ADDRESS	3840 KING SAGO COURT	6.3 STREET ADDRESS	
CITY - ST - ZIP	OVIEDO FL 32765	6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Robert W. Martin (ROBERT W. MARTIN) 1/27/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature/Stamp

407 365 9699

0032041