


FILED
Apr 21, 2006 8:00 am
Secretary of State

04-21-2006 90106 006 ****70.00

2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # N93000004273			
1. Entity Name PALM VALLEY HOMEOWNERS ASSOCIATION, INC.			
Principal Place of Business 160 E PALM VALLEY DRIVE OVIEDO, FL 32765		Mailing Address 160 E PALM VALLEY DRIVE OVIEDO, FL 32765	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-3204598		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
LEVEY, T.J. 931 E PALM VALLEY DRIVE OVIEDO, FL 32765		Name Johnson Gerald Street Address (P.O. Box Number is Not Acceptable) 672 Bamboo Palm Way City Oviedo FL Zip Code 32765	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE <u>Gerald Johnson</u> Signature, typed or printed name of registered agent and date if applicable.		Gerald Johnson T 4/18/06 (NOTE: Registered Agent signature required when renouncing) DATE	
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES LEVEY, T.J. 931 E. PALM VALLEY DR OVIEDO, FL 32765 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Reynolds, Rich 883 E. Palm Valley Drive Oviedo, FL 32765 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP REYNOLDS, RICH 883 E. PALM VALLEY DRIVE OVIEDO, FL 32765 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Gingold, David 372 E. Palm Valley Drive Oviedo, FL 32765 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA MC CONNELL, JIM 3841-KING SAGO CT OVIEDO, FL 32765 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Johnson, Gerald 672 Bamboo Palm Way Oviedo, FL 32765 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECY HARTWIG, GINNY 3906 NEEDLE PALM PL OVIEDO, FL 32765 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR KEIFER, BETH 3987 SABAL DR OVIEDO, FL 32765 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Anne Ashley 4204 Sugar Palm Ter. Oviedo, FL 32765 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR MCGUIRE, DOROTHY 3720 CHRISTMAS PALM PLACE OVIEDO, FL 32765 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Harris, Harold 948 Lantania Place Oviedo, FL 32765 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Gerald Johnson</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Gerald Johnson T 4/18/06 407-359-8685 Date Daytime Phone #	