2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706393

FILED May 01, 2006 Secretary of State

Entity Name: SOUTH PALM PARK ASSOCIATION, INC.

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

1117 SO. PALMWAY

LAKE WORTH, FL 33460 LIS

Current Mailing Address: New Mailing Address:

1117 SO. PALMWAY

LAKE WORTH, FL 33460 US

FEI Number Applied For () FEI Number: 59-2163275 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: Name and Address of New Registered Agent:

LACY, PATRICK C 1117 SO. PALMWAY

LAKE WORTH, FL 33460 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:

Date

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

Electronic Signature of Registered Agent

1216 SO. LAKESIDE DRIVE

LAKE WORTH, FL 33460

LAKE WORTH, FL 33460

CHAPNICK, DAVID

RUSSELL, ROBERT

SO. PALMWAY

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

(X) Change () Addition

() Delete LACY, PATRICK Name: 1117 S. PALMWAY Address:

City-St-Zip: LAKE WORTH, FL 33460

Title: () Delete Name: FLEMING, SUSAN Address: 520 S. PALMWAY

City-St-Zip: LAKE WORTH, FL 33460

Title: () Delete Title: DIR (X) Change () Addition

CHAPNICK, DAVID Name: LACY, PATRICK Name: 1216 SO. LAKESIDE DRIVE 1117 SO. PALMWAY Address: Address: City-St-Zip: LAKE WORTH, FL 33460 City-St-Zip: LAKE WORTH, FL 33460

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: PATRICK C. LACY DIR 05/01/2006