2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000007200

FILED Mar 16, 2009 Secretary of State

Entity Name: THE PALMS AT ATLANTIS HOMEOWNERS ASSOCIATION, INC.

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

C/O CMC MANAGEMENT
2994 JOY RD, STE B
2950 JOG ROAD
LAKE WORTH, FL 33467

C/O CMC MANAGEMENT
2950 JOG ROAD
LAKE WORTH, FL 33467

Current Mailing Address: New Mailing Address:

C/O CMC MANAGEMENT
2994 JOY RD, STE B
2950 JOG ROAD
GREENACRES, FL 33467
LAKE WORTH, FL 33467

FEI Number: 65-0827598 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GERRISH, SCOT A SCHNER, LARRY P.A.
2999 JOG RD STE B 750 SOUTH DIXIE HWY
GREENACRES, FL 33467 US BOCA RATON, FL 33432 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: LARRY SCHNER 03/16/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: GREAVETTE, WILLIAM Name: GREAVETTE, WILLIAM

 Address:
 224 PALM CIR
 Address:
 224 PALM CIR

 City-St-Zip:
 LAKE WORTH, FL 33462
 City-St-Zip:
 ATLANTIS, FL 33462

Title: ST () Delete Title: T (X) Change () Addition Name: POZNICK, RICHARD Name: POZNICK, RICHARD

Address: 175 PALM CIRCLE Address: 175 PALM CIRCLE
City-St-Zip: LAKE WORTH, FL 33462 City-St-Zip: ATLANTIS, FL 33462

Title: D () Delete Title: D (X) Change () Addition Name: DUKE, TOM Name: DUKE, TOM

Address: 120 PALM CIRCLE Address: 120 PALM CIRCLE
City-St-Zip: LAKE WORTH, FL 33462 City-St-Zip: ATLANTIS, FL 33462

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad (\) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf VP} \qquad ({\sf X}) \, {\sf Change} \, (\) \, {\sf Addition}$

 Name:
 SEMWEIKART, PAT
 Name:
 SEMWEIKART, PAT

 Address:
 105 PALM CIR
 Address:
 105 PALM CIR

 City-St-Zip:
 LAKE WORTH, FL 33462
 City-St-Zip:
 ATLANTIS, FL 33462

 $\label{eq:title:S} {\sf Title:} \qquad {\sf S} \qquad {\sf (1) Delete} \qquad \qquad {\sf Title:} \qquad {\sf S} \qquad {\sf (X) Change (1) Addition}$

 Name:
 TIMMINS, GEARY
 Name:
 TIMMINS, GEARY

 Address:
 108 PALM CIR
 Address:
 108 PALM CIR

 City-St-Zip:
 LAKE WORTH, FL 33462
 City-St-Zip:
 ATLANTIS, FL 33462

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: BILL GREAVETTE P 03/16/2009