

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000001513

**Entity Name:** EAGLE PALMS HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Feb 21, 2014**  
**Secretary of State**  
**CC7737749729**

**Current Principal Place of Business:**

THE PROFESSIONAL CENTER  
7800 66TH STREET N SUITE #205  
PINELLAS PARK, FL 33781

**Current Mailing Address:**

THE PROFESSIONAL CENTER  
7800 66TH STREET N SUITE #205  
PINELLAS PARK, FL 33781 US

**FEI Number:** 20-4432923

**Certificate of Status Desired:** No

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

CONDOMINIUM MGMT GROUP  
THE PROFESSIONAL CENTER  
7800 66TH STREET N SUITE #205  
PINELLAS PARK, FL 33781 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:** RONALD D WELTON

02/21/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name MAIDLOW, DON  
Address THE PROFESSIONAL CENTER  
7800 66TH STREET N SUITE #205  
City-State-Zip: PINELLAS PARK FL 33781

Title VP  
Name BONNET, ED  
Address THE PROFESSIONAL CENTER  
7800 66TH STREET N SUITE #205  
City-State-Zip: PINELLAS PARK FL 33781

Title ST  
Name FISCHER, MADELINE  
Address THE PROFESSIONAL CENTER  
7800 66TH STREET N SUITE #205  
City-State-Zip: PINELLAS PARK FL 33781

*I hereby 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 all other like empowered.*

**SIGNATURE:** DON MAIDLOW

P

02/21/2014

Electronic Signature of Signing Officer/Director Detail

Date