

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17079

**FILED  
Apr 20, 2016  
Secretary of State  
CC8858306852**

**Entity Name:** THE HOMEOWNERS' ASSOCIATION OF THE PALMS, INC.

**Current Principal Place of Business:**

UNIVERSITY PROP INC  
7001 TEMPLE TERRACE HWY  
TEMPLE TERRACE, FL 33637

**Current Mailing Address:**

UNIVERSITY PROP  
7001 TEMPLE TERRACE  
TEMPLE TERRACE, FL 33637 US

**FEI Number:** 59-2721297

**Certificate of Status Desired:** No

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

DUARTE, ANTONIO  
6221 LAND O' LAKES BLVD.  
LAND O' LAKES, FL 34639 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name WISLER, TINA  
Address 924 BURLWOOD  
City-State-Zip: BRANDON FL 33511

Title TREASURER  
Name FRENCH, MARGO  
Address 870 BURLWOOD  
City-State-Zip: BRANDON FL 33511

Title D/P  
Name SANCHEZ, SAMUEL  
Address 708 BURLWOOD  
City-State-Zip: BRANDON FL 33511

Title D  
Name SHOUPE, BRENDA  
Address 872 BURLWOOD  
City-State-Zip: BRANDON FL 33511

*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:** SAMUEL SANCHEZ

**PRESIDENT**

**04/20/2016**

Electronic Signature of Signing Officer/Director Detail

Date