2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17864

Entity Name: PALM CAY HOMEOWNERS ASSOCIATION, INC.

FILED
Jan 07, 2017
Secretary of State
CC6126485995

Current Principal Place of Business:

8063 SW 106 PLACE OCALA, FL 34481

Current Mailing Address:

P.O.BOX 772042

OCALA, FL 34481 US

FEI Number: 59-2774085 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WARNER, CHARLES 10668 SW 85 TERRACE OCALA, FL 34481 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: CHARLES WARNER 01/07/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

| Title | PD | Title | VD |
|-------|----|-------|----|
| | | | |

Name WARNER, CHARLES Name MILLER , JUDITH

Address 10668 SW 85 TERRACE Address 11063 SW 75 AVENUE

City-State-Zip: OCALA FL 34481 City-State-Zip: OCALA FL 34476

Title TREASURER Title SECRETARY

 Name
 EDGERTON, CARL
 Name
 HENDRICKS, LINDA

 Address
 8356 SW 106 STREET
 Address
 11089 SW 78 COURT

 City-State-Zip:
 OCALA FL 34481
 City-State-Zip:
 OCALA FL 34476

Title D Title C

Name COVAIS, MARIE Name FOLEY, DAVID

Address 11041 SW 75 AVENUE Address 8142 SW 106 STREET

City-State-Zip: OCALA FL 34476 City-State-Zip: OCALA FL 34481

Title D Title D

NameGRAMLING, KAYNameHUTCHINS, ISABELLEAddress11287 SW 77 COURTAddress10961 SW 79 AVECity-State-Zip:OCALA FL 34476City-State-Zip: OCALA FL 34476

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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: CARL EDGERTON TREASURER 01/07/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title D

Address

Name IRISH, SANDRA 8511 SW 106 PLACE

City-State-Zip: OCALA FL 34481