

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004273

Entity Name: PALM VALLEY HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**3700 PALM VALLEY CIRCLE
OVIEDO, FL 32765**Current Mailing Address:**850 CAROLINA PALM LANE
OVIEDO, FL 32765 US**FEI Number:** 59-3204598**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FERRELL, SUSAN
699 BAMBOO PALM WAY
OVIEDO, FL 32765 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:** SUSAN FERRELL

01/26/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRES
Name	GRIMM, MARVIN
Address	3901 NEEDLE PALM PLACE
City-State-Zip:	OVIEDO FL 32765
Title	TREA
Name	FERRELL, SUSAN
Address	850 CAROLINA PALM LANE
City-State-Zip:	OVIEDO FL 32765
Title	DIR
Name	COHEN, CARL
Address	3713 COCONUT PALM CIRCLE
City-State-Zip:	OVIEDO FL 32765
Title	DIR
Name	SCUTT, FRANK
Address	891 CAROLINA PALM LANE
City-State-Zip:	OVIEDO FL 32765

Title	VP
Name	BURFITT, DEL
Address	3700 SENEGAL CIRCLE
City-State-Zip:	OVIEDO FL 32765
Title	SECY
Name	LANOUE, TERESA
Address	3988 SABAL DRIVE
City-State-Zip:	OVIEDO FL 32765
Title	DIR
Name	KLING, DAN
Address	4096 SUGAR PALM TERRACE
City-State-Zip:	OVIEDO FL 32765
Title	DIR
Name	JOLIFF, MARA LEE
Address	874 CAROLINA PALM LANE
City-State-Zip:	OVIEDO FL 32765

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: SUSAN FERRELL**TREASURER**

01/26/2013

Electronic Signature of Signing Officer/Director Detail

Date