

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 17 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 702080 (3)

1. Corporation Name

PALMS OF SEBRING, INC.

Principal Place of Business

725 S PINE ST.  
SEBRING FL 33870

Mailing Address

725 S PINE ST.  
SEBRING FL 33870-36543. Date Incorporated or Qualified  
03/01/19613a. Date of Last Report  
04/18/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City &amp; State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City &amp; State

28

Zip

Country

29

30

4. FEI Number

59-0934514

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes☐Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

MAY, RODNEY K., ESQ.  
111 NORTH ORANGE AVE.  
SUITE 1800  
ORLANDO FL 32802-9193

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE  
NAME ALDRICH, STEPHEN  
STREET ADDRESS 4512 PITCHING WEDGE WAY  
CITY-ST-ZIP SEBRING FLTITLE VD ☒ DELETE  
NAME BIELEFELD, VERNON  
STREET ADDRESS 1535 SHAMROCK DRIVE  
CITY-ST-ZIP SEBRING FLTITLE VD ☒ DELETE  
NAME ZIN, PHILIP  
STREET ADDRESS 1405 E. HENRY STREET  
CITY-ST-ZIP TAMPA FLTITLE TD ☒ DELETE  
NAME MILLER, ELIZABETH  
STREET ADDRESS 3651 US 27 SOUTH 193  
CITY-ST-ZIP SEBRING FL 33870TITLE SD ☐ DELETE  
NAME EARLY, RUTH  
STREET ADDRESS 245 OAK AVENUE, APT. 514  
CITY-ST-ZIP SEBRING FLTITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP2.1 TITLE 1ST Vice President ☐ Change ☒ Addition  
2.2 NAME John Borr  
2.3 STREET ADDRESS 2211 Pinewood Blvd.  
2.4 CITY-ST-ZIP Sebring, FL 338703.1 TITLE 2nd Vice President ☐ Change ☒ Addition  
3.2 NAME Ralph Hollenberg  
3.3 STREET ADDRESS 3701 Kearly Avenue  
3.4 CITY-ST-ZIP Sebring, FL 338724.1 TITLE Treasurer ☐ Change ☒ Addition  
4.2 NAME John Lengyel  
4.3 STREET ADDRESS 4321 Duffer Loop  
4.4 CITY-ST-ZIP Sebring, FL 338725.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Stephen R. Aldrich  
STEPHEN R. ALDRICH1/22/97 407-629-2009  
Date Daytime Phone # 0064170

CR2E037 (9/96)