

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 **DOCUMENT # 732791**

1. Corporation Name

PALMLAND VILLAS I CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 1906 PALMLAND DRIVE **BOYNTON BEACH FL 33436** Mailing Address

C/O ASSOCIATION MANAGEMENT GROUP 7187 THOMPSON RD

LANTANA FL 33462

FILED Mar 11, 1999 8:00 am secretary of State

03-11-1999 90245 031 ****61.25

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2. Principal Pl	ace of Business	of Business 2a. Mailing Address			3. Date Incorporated or Qualifed	
21		26			05/19/1975	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			4. FEI Number Applied For	
22		27			59-1731142 Not Applicable	
City & State	9	City & State			5. Certificate of Status Desired \$8.75 Additional	
23		28			5. Certificate of Status Desired Fee Required	
Zip	Country	Zip	Country		6. Election Campaign Financing \$5.00 May Be	
24	25	29 30)		Trust Fund Contribution Added to Fees	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent	
			81	Name		
LINOVARY IANET			93	82 Street Address (P.O. Box Number is Not Acceptable)		
	HUCKABY, JANET 7187 THOMPSON RD			82) Street Address (P.O. Box Number is Not Acceptable)		
			83			
LANTANA	FL 33462					
			84	City	FL 85 Zip Code	
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						
12.	Signature, typed or printed name of registered agent		13.	nt signature req	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
	OFFICERS AND	DELETE	1.1 TITLE		₹D □ Change ★Addition	
TITLE	PD	J. C.	1.2 NAME		1 o BOB	
NAME	ANASTASI, DOMINIC				1906C PAIMLAND PR	
STREET ADDRESS	1912 A PALM LAND DRIVE				, , , ,	
CITY-ST-ZIP	BOYNTON BEACH FL	A-L-	1.4 CITY-S	T-ZIP	Boynton Beach, FC 33436 VPD Change MAddition	
TITLE	SVPD	DELETE	2.1 TITLE	Ι,	Timbing Madiner	
NAME	MUENCH, PAUL	•	2.2 NAME	I	Can Did!	
STREET ADDRESS	1918 B PALMLAND DRIVE		2.3 STREE	TADDRESS	6 10 20101	
Ctty-St-ZIP	BOYNTON BEACH FL		2.4 CITY-		Boynton BEACH, FL 33436	
TITLE	SD	DELETE	3.1 TITLE	T.	SO. J VAILLANCOURT, MIN DO	
NAME	HART, MARSHALL		3.2 NAME		1916 D PALMLAND DR	
STREET ADDRESS	1904-D PALMLAND DRIVE		3.3 STREE	TADORESS		
CITY-ST-ZIP	BOYNTON BEACH FL		3.4. CITY+	ST-ZIP	BOUNTON BEACH, FL 38436	
TITLE	TD	DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME	DENNIS, SONJA	(`	4. 2 NAME	ļ		
STREET ADDRESS	1898-D PALMLAND DRIVE		4.3 STREE	T ADDRESS	•	
CITY-ST-ZIP	BOYNTON BEACH FL		4.4 CITY-S	rr-zip	·	
TITLE	D	DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME	ANASTASI, DOMINIC	^	5.2 NAME		\cdot	
STREET ADDRESS	1912-A PALMLAND DRIVE		5.3 STREE	T ADDRESS		
CITY-ST-ZIP	BOYNTON BEACH FL		5.4 CITY-9	IT-ZIP		
TITLE	SVPD	DELETE	6.1 TITLE	-	☐ Change ☐ Addition	
NAME	****	7	6.2 NAME			
	MUENCH, PAUL		1	TADDRESS	· .	
STREET ADDRESS	10.00		6.4 CITY-5		·	
CITY-ST-ZIP	ROYNTON REACH FI		0.4 (1117-5	11-211		

I 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, with all other like empowered.

SIGNATURE:

RINTED NAME OF SIGNING OFFICER OR DIRECTOR