2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED Feb 18, 2008 8:00 am Secretary of State 02-18-2008 90021 017 ****61.25

DOCUMENT # 733618 1. Entity Name THE PALM CLUB ASSOCIATION, INC.					:-2008 90021 017 ***	**61.25	
Principal Place of Business 38 CLUB HOUSE DR #100 PALM COAST, FL 32137		Mailing Address 38 CLUB HOUSE DR #100 PALM COAST, FL 32137					
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01302008 Chg-N	P CR2E037 (12/	06)	
City & State		City & State		4. FEI Number 59-1742430		Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status I	Desired	Additional quired	
	6. Name and Address of Current	Registered Agent		7. Name and Address	of New Registered Agent		
MIKTO TA	MIKLO, JANE BENHAM, WILL'S A.			Name			
PALM COAST, FL 32137			Street Address	Street Address (P.O. Box Number is Not Acceptable)			
					· · · · · · · · · · · · · · · · · · ·		
			City	FL Zip Code			
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Storage by the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Storage by the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Storage by the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE SIGNATURE Storage by the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE SIGNA						_	
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Camp Trust Fund Cor		\$5.00 May Be Added to Fees	Make check payal Florida Department	of State	
10.	OFFICERS AND DIF		11.	ADDITIONS/CHANGES TO	O OFFICERS AND DIRECTOR	 	
NAME STREET ADDRESS CITY-ST-ZIP	BENHAM, WILLIS A- 58 CLUB HOUSE DR. E104 PALM COAST, FL 32137	□ Delete	NAME STREET ADDRESS CITY-ST-ZIP		☐ Cha	ange 🗌 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	A8 7 D MCABE, ROSE 48 CLUBHOUSE DR UNIT 208 PALM COAST, FL 32137	☐ Delete	TITLE TD NAME STREET ADDRESS CITY-ST-ZIP		∑ Cha	ange Addition	
TITLE			i				
NAME STREET ADDRESS CITY-ST-ZIP	VP GAMBINO, PETER 46 CLUB HOUSE DRIVE E206 PALM COAST, FL 32137	☐ Delate	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u> </u>	□ cha LAUG HL: I	•	
NAME STREET ADDRESS	GAMBINO, PETER 46 CLUB HOUSE DRIVE E206	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS U121	PAUL A. M CYA'MELAU CLUBHOUSE	LCLAUGHL: 1 6HLIN One DR #108	√ · ·	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	GAMBINO, PETER 46 CLUB HOUSE DRIVE E206 PALM COAST, FL 32137 SD-D MIKLO, JANE 40 CLUBHOUS DRIVE #103		NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME R R R	PAUL A. M	CLAUGHL: 1 6HLIN	inge ► Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 of the receiver of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, withall other like empowered.

SIGNATURE

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