## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#733618** 

FILED Feb 20, 2009 Secretary of State

Entity Name: THE PALM CLUB ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 38 CLUB HOUSE DR #100 PALM COAST, FL 32137 **New Mailing Address: Current Mailing Address:** 38 CLUB HOUSE DR #100 PALM COAST, FL 32137 FEI Number: 59-1742430 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BENHAM, WILLIS A 40 CLUB HOUSE DR. UNIT 100 PALM COAST, FL 32137 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete BENHAM, WILLIS BENHAM, WILLIS Name: Name: 58 CLUB HOUSE DR. E104 Address: 58 CLUB HOUSE DR. E104 Address: City-St-Zip: PALM COAST, FL 32137 City-St-Zip: PALM COAST, FL 32137 Title: Title: ( ) Delete () Change () Addition MCABE, ROSE Name: Name: Address: 48 CLUBHOUSE DR UNIT 208 Address: City-St-Zip: PALM COAST, FL 32137 City-St-Zip: Title: () Delete Title: () Change () Addition GAMBINO, PETER Name: Name: 46 CLUB HOUSE DRIVE E206 Address: Address: City-St-Zip: PALM COAST, FL 32137 City-St-Zip: Title: SEC ( ) Delete Title: () Change () Addition MCLAUGHLIN, PAUL A Name: Name: 44 CLUBHOUSE DR #108 Address: Address: City-St-Zip: PALM COAST, FL 32137 City-St-Zip: Title: AST () Delete Title: AST (X) Change ( ) Addition DEVARD, ROBERT N MIKLO, JANE Name: Name: 4490 US 1 NORTH 40 CLUBHOUSE DR, UNIT 103 Address: Address: City-St-Zip: BUNNELL, FL 32110 City-St-Zip: BUNNELL, FL 32137 Title: (X) Delete Title: () Change () Addition GUSTAVSON, GEORGE Name: Name: Address: 54 CLUB HOUSE DRIVE E105 Address: PALM COAST, FL 32137 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: WILLIS A. BENHAM PD 02/20/2009