

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

DOCUMENT# 745628

**FILED**  
**Jan 25, 2008**  
**Secretary of State**

**Entity Name:** PALM SPRINGS TOWNHOMES OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

221 ALEMEDA DR.  
PALM SPRINGS, FL 33461 US

**New Principal Place of Business:**

**Current Mailing Address:**

221 ALEMEDA DR.  
PALM SPRINGS, FL 33461 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WILLIAMS, JAMES  
221 ALEMEDA DR  
PALM SPRINGS, FL 33461 US

**Name and Address of New Registered Agent:**

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:**

Title: PD                      ( ) Delete  
Name: WILLIAMS, JAMES  
Address: 221 ALEMEDA DR.  
City-St-Zip: PALM SPRINGS, FL 33461

Title: MS                      ( ) Delete  
Name: BEABOUT, MARIKAY  
Address: 2365 ALAMEDA DR  
City-St-Zip: PALM SPRINGS, FL 33461

Title: MR                      ( ) Delete  
Name: LANCASTER, JAMES  
Address: 224 ALEMEDA DR  
City-St-Zip: PALM SPRINGS, FL 33461

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:                                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:                                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:                                      ( ) Change ( ) Addition  
Name:  
Address:  
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: MARIKAY BEABOUT

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

SECT

01/25/2008

\_\_\_\_\_  
Date