

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2008 8:00 am
Secretary of State

03-05-2008 90025 011 ****61.25

DOCUMENT # 749786 1. Entity Name PALM LAKE ESTATES RESIDENT ASSOCIATION, INCORPORATED					
Principal Place of Business 808 53RD AVE. E. BRADENTON, FL 34203			Mailing Address 808 53RD AVE. E. LOT 154 BRADENTON, FL 34203 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-2371790	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent SISSON, WILLIAM 808 53RD AVE E #299 BRADENTON, FL 34203				7. Name and Address of New Registered Agent Name LACREDA J. OKERMAN Street Address (P.O. Box Number is Not Acceptable) 808 53RD AVE E. 266K City BRADENTON FL Zip Code 34203	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE LACREDA J. OKERMAN, Treasurer <i>Lacreda J. Okerman</i> 2-29-08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DYKETRA, ELIZABETH 808 53RD AVE EAST #237J BRADENTON, FL 34203	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PERRY, SHIRLEY 808 53RD AVE E #158 BRADENTON, FL 34203	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SISSON, WILLIAM 808 53RD AVE E #299 BRADENTON, FL 34203	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FECHER, PAT 808 53RD AVE E #244 BRADENTON, FL 34203	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOREHEAD, PAT 808 53RD AVE EAST #49A BRADENTON, FL 34203	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GILES, JUDY 808 53RD AVE E #26 BRADENTON, FL 34203	<input type="checkbox"/> Delete			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY LINDA WILHELM 808 53RD AVE E #165 BRADENTON, FL 34203	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER LACREDA J. OKERMAN 808 53RD AVE E 266K BRADENTON, FL 34203	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR Peggy La Forge 808 53rd Ave E 169J BRADENTON, FL 34203	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> 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 or the receiver or 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, with all other like empowered.					
SIGNATURE: <i>Lacreda J. Okerman, Treasurer</i> 2-29-08 741-758-9496 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					