

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754187

FILED
Mar 08, 2009
Secretary of State

Entity Name: COURT OF PALMS HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

2780-2790 OCEAN SHORE BLVD.
ORMOND BEACH, FL 32176

New Principal Place of Business:

Current Mailing Address:

1034 RIDGEWOOD AVE STE. 1
DAYTONA BEACH, FL 32117

New Mailing Address:

FEI Number: 59-2032390

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TYLER PROPERTY MANAGEMENT LLC
1034 RIDGEWOOD AVE, STE. 1
HOLLY HILL, FL 32117 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: P () Delete
Name: HARDY, TODD
Address: 44 SILK OAKS DRIVE
City-St-Zip: ORMOND BEACH, FL 32176

Title: VP () Delete
Name: WILBUR, BARBARA
Address: 2780 OCEAN SHORE #5
City-St-Zip: ORMOND BEACH, FL 32176

Title: S () Delete
Name: BERRY, FRAN
Address: 8520 HUNT CLUB RD
City-St-Zip: THURMONT, MD 21788

Title: T () Delete
Name: HOLCOMB, STEVE
Address: 1500 MALTBY RD
City-St-Zip: MARBLE, NC 28905

Title: D () Delete
Name: KAVENNAUGH, MARY
Address: 59 MYRTLE AVE
City-St-Zip: BUTLER, NJ 07405

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: BERRY, FRAN
Address: 8520 HUNT CLUB RD
City-St-Zip: THURMONT, MD 21788

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

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

Title: S () Change (X) Addition
Name: WOHLFERT, PHIL
Address: 8 WHITTING PLACE
City-St-Zip: PALM COAST, FL 32164

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: TODD HARDY

P

03/08/2009

Electronic Signature of Signing Officer or Director

Date