2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#756439

FILED Feb 09, 2005 Secretary of State

Entity Name: PALMA DEL SOL HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 1166 PELICAN BAY DRIVE DAYTONA BEACH, FL 321191381 **Current Mailing Address: New Mailing Address:** 1166 PELICAN BAY DRIVE DAYTONA BEACH, FL 321191381 FEI Number: 59-2798762 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: BARKIN, MICHELE NELSON NELSON & SELWITZ PROPERTY MANAGEMENT 1166 PELICAN BAY DRIVE DAYTONA BEACH, FL 32119 US 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: VPD () Delete (X) Change () Addition KLEIN, ELLEN Name: KLEIN, ELLEN Name: 104 SEA SPARROW CT Address: 104 SEA SPARROW CT Address: City-St-Zip: DAYTONA BCH, FL 32119 City-St-Zip: DAYTONA BCH, FL 32119 Title: PD Title: (X) Change () Addition () Delete LIEHR, TOM Name: HELSTETTER, JACK Name: Address: 120 SEA SPARROW Address: 161 SEA HAWK DR. City-St-Zip: DAYTONA BEACH, FL 32119 City-St-Zip: DAYTONA BEACH, FL 32119 Title: () Delete Title: () Change () Addition VERNON, BETTY Name: Name: 121 SANDFIDDLER CT. Address: Address: City-St-Zip: DAYTONA BEACH, FL 32119 City-St-Zip: Title: () Delete Title: VPD (X) Change () Addition HILL, MURRAY HILL, MURRAY Name: Name: 124 MARSH WREN CT. 124 MARSH WREN CT. Address: Address: City-St-Zip: DAYTONA BEACH, FL 32119 City-St-Zip: DAYTONA BEACH, FL 32119 Title: () Delete Title: () Change () Addition LIEHR, SHARON Name: Name: 120 SEAHAWK Address: Address: City-St-Zip: DAYTONA BEACH, FL 32119 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JACK HELMSTETTER PD 02/09/2005