## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#756439**

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

Entity Name: PALMA DEL SOL HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

1190 PELICAN BAY DRIVE DAYTONA BEACH, FL 321191381

**Current Mailing Address: New Mailing Address:** 

1190 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 1190 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:

Date

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete HELMSTETTER, JACK SUSSAN, PHILIP DR. Name: Name: 160 SEA HAWK DR. Address: 158 SEA HAWK DR. Address: City-St-Zip: DAYTONA BCH, FL 32119 City-St-Zip: DAYTONA BCH, FL 32119

Title: VPD ( ) Delete Title: VPD (X) Change ( ) Addition RIEDI, WALT Name: ZINER, TONY Name:

Address: 120 WATER TURKEY Address: 154 SEA HAWK City-St-Zip: DAYTONA BEACH, FL 32119 City-St-Zip: DAYTONA BEACH, FL 32119

Title: () Delete Title: SD (X) Change ( ) Addition VERNON, BETTY WEBER, PAT Name: Name:

121 SANDFIDDLER CT. Address: Address: 108 GADWELL

City-St-Zip: DAYTONA BEACH, FL 32119 City-St-Zip: DAYTONA BEACH, FL 32119

(X) Change ( ) Addition Title: TD ( ) Delete Title: TD Name: SUSSAN, AYSAR Name: MELIGNANO, CARMINE

Address: 158 SEA HAWK Address: 108 SEA SPARROW City-St-Zip: DAYTONA BEACH, FL 32119 City-St-Zip: DAYTONA BEACH, FL 32119

Title: ( ) Delete Title: (X) Change ( ) Addition

COYNE, TOM LAWYER, TOM Name: Name: 116 GADWELL 120 GADWELL Address: Address:

DAYTONA BEACH, FL 32119 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 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: DR. PHILIP SUSSAN PD 02/25/2008