

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 17, 2003 8:00 am
Secretary of State

02-17-2003 90191 003 ****61.25

DOCUMENT # 768258

1. Entity Name

THE PALMS MOBILE HOMEOWNER'S ASSOCIATION, INC.



Principal Place of Business

**203 MEANIE CIRCLE E
SEBASTIAN FL 32958
US**

Mailing Address

**203 MEANIE CIRCLE E
SEBASTIAN FL 32958
US**

2. Principal Place of Business

86 MARK ALLEN DR

Suite, Apt. #, etc.

3. Mailing Address

86 MARK ALLEN DR.

Suite, Apt. #, etc.

City & State

SEBASTIAN, FL

City & State

SEBASTIAN, FL

Zip

32958

Country

USA

Zip

32958

Country

USA

4. FEI Number **59-2350690**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**LUCIER, BERNIE
203 MEANIE CIR E
SEBASTIAN FL 32958**

7. Name and Address of New Registered Agent

Name **BLAIS, JOHN C.**

Street Address (P.O. Box Number is Not Acceptable)

86 MARK ALLEN DR.

City

SEBASTIAN

FL

Zip Code
32958

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 **BLAIS, JOHN, TREASURER** **Feb 13, 2003**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	SMITS, CHUCK	
STREET ADDRESS	150 PHYLLIS DRIVE	
CITY-ST-ZIP	SEBASTIAN FL 32958	
TITLE	D	<input type="checkbox"/> Delete
NAME	CHUHLOTT, RISTIE	
STREET ADDRESS	160 RICHARD ST	
CITY-ST-ZIP	SEBASTIAN FL 32958	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	LANE, LARRY	
STREET ADDRESS	78 PHILLIPS DR	
CITY-ST-ZIP	SEBASTIAN FL 32958	
TITLE	D	<input type="checkbox"/> Delete
NAME	FLICKINGER, KEN	
STREET ADDRESS	135 SUE AVE	
CITY-ST-ZIP	SEBASTIAN FL 32958	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	LUCIER, BERNIE	
STREET ADDRESS	203 MEANIE CIR E	
CITY-ST-ZIP	SEBASTIAN FL 32958	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	CLEARY, JACK	
STREET ADDRESS	114 PHYLLIS DRIVE	
CITY-ST-ZIP	SEBASTIAN FL 32958	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	S.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Chizek, JOE	
STREET ADDRESS	59 PHYLLIS DR.	
CITY-ST-ZIP	SEBASTIAN, FL 32958	
TITLE	T.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BLAIS, JOHN C.	
STREET ADDRESS	86 MARK ALLEN DR	
CITY-ST-ZIP	SEBASTIAN, FL 32958	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MINER, JIM	
STREET ADDRESS	52 BABE AVE.	
CITY-ST-ZIP	SEBASTIAN, FL 32958	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VANDERLICK, LORRAINE	
STREET ADDRESS	136 SUE AVE.	
CITY-ST-ZIP	SEBASTIAN, FL 32958	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JENSEN, BILL	
STREET ADDRESS	57 PHYLLIS DR.	
CITY-ST-ZIP	SEBASTIAN, FL 32958	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LANE, LARRY	
STREET ADDRESS	78 PHILLIPS DR.	
CITY-ST-ZIP	SEBASTIAN FL 32958	

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

SIGNATURE REQUIRED

Feb 13, 2003 172-589-7786

CR2E037 (10/02)