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Apr 09 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 768709 (8)

1. Corporation Name

PALM BAY RESIDENTS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

751 EAST 10TH ST
PALMETTO FL 34221
US751 EAST 10TH ST
#141
PALMETTO FL 34221-5325
US3. Date Incorporated or Qualified
06/01/19833a. Date of Last Report
04/01/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STANLEY, IRENE L
751 10TH ST. E, LOT 141
PALMETTO FL 34221

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P	<input type="checkbox"/> DELETE
NAME	LICATA, CHARLES	
STREET ADDRESS	751 10TH STREET E. LOT #406	
CITY-ST-ZIP	PALMETTO FL 34221	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	

TITLE	T	<input type="checkbox"/> DELETE
NAME	STANLEY, IRENE L	
STREET ADDRESS	751 10TH ST. E., 141	
CITY-ST-ZIP	PALMETTO FL	

2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	

TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	SHARP, BETTY	
STREET ADDRESS	751 EAST 10TH ST #419	
CITY-ST-ZIP	PALMETTO FL	

3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	GAMMON, NORMA
3.3 STREET ADDRESS	751 EAST 10th St. #407
3.4 CITY-ST-ZIP	PALMETTO, FL 34221

TITLE	VPD	<input checked="" type="checkbox"/> DELETE
NAME	WOOD, DONALD	
STREET ADDRESS	751 10TH ST. E #609	
CITY-ST-ZIP	PALMETTO FL 34221	

4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	SMITH, AL
4.3 STREET ADDRESS	751 EAST 10th St. #318
4.4 CITY-ST-ZIP	PALMETTO, FL 34221

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	SICKLES, WILLIAM	
STREET ADDRESS	751 EAST 10TH ST, #613	
CITY-ST-ZIP	PALMETTO FL	

5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	REID, ED
5.3 STREET ADDRESS	751 EAST 10th St. #317
5.4 CITY-ST-ZIP	

TITLE	VPD	<input checked="" type="checkbox"/> DELETE
NAME	MC LAUGHLIN, ROWLAND	
STREET ADDRESS	751 10TH ST. E #160	
CITY-ST-ZIP	PALMETTO FL 34221	

6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	WOOD, DONALD
6.3 STREET ADDRESS	751 EAST 10th St #609
6.4 CITY-ST-ZIP	PALMETTO, FL 34221

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: IRENE L STANLEY *Irene Stanley* 3/21/97 (941) 729-2888
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date Daytime Phone # 0062247

CR2E037 (9/96)