

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G94975

FILED  
Apr 26, 2011  
Secretary of State

**Entity Name:** HOME OWNERS OF PALM HILL, INC.

**Current Principal Place of Business:**

1800 SEMINOLE BLVD.  
LARGO, FL 33778

**New Principal Place of Business:**

**Current Mailing Address:**

9887 4 STREET N STE 301  
ST PETERSBURG, FL 33702

**New Mailing Address:**

**FEI Number:** 59-2442889

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RAMPART PROPERTYIES, INC.  
9887 4 STREET N STE 301  
ST PETERSBURG, FL 33702 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: PD  
Name: REXROAT, LINN  
Address: 52 PINDO PALM EAST  
City-St-Zip: LARGO, FL 33770

Title: SD  
Name: HOOPER, CAROLYN  
Address: 45 PINDO PALM EAST  
City-St-Zip: LARGO, FL 33778

Title: TD  
Name: THOMPSON, JIM  
Address: 833 CANE PALM  
City-St-Zip: LARGO, FL 33778

Title: ATD  
Name: THOM, BROWN  
Address: 94 ROYAL PALM CIRCLE  
City-St-Zip: LARGO, FL 33778

Title: D  
Name: ECKHART, CHRISTINE  
Address: 2 THATCH PALM EAST  
City-St-Zip: LARGO, FL 33770

Title: VPD  
Name: GREGORIO, RICHARD  
Address: 2 THATCH PALM WEST  
City-St-Zip: LARGO, FL 33778

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LINN REXROAT

PD

04/26/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date