

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **H52657** (4)
1. Corporation Name
PALM VILLAGE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business: C/O RALPH GIERHART, 3528 14TH ST. W. LOT G-9, BRADENTON FL 34205
Mailing Address: C/O RALPH GIERHART, 3528 14TH ST. W. LOT G-9, BRADENTON FL 34205

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields.

3. Date Incorporated or Qualified: 04/17/1985
3a. Date of Last Report: 04/14/1995
4. FEI Number: 59-2646202
5. Certificate of Status Desired: Pro
6. Election Campaign Financing:
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

THOMAS, KATHRYN C.
3528 14TH ST. W. LOT C16
BRADENTON FL 34205

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: FL

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: _____ (DATE: _____)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	NAME: GIERHART, RALPH	11 TITLE: PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: 3528 14TH ST. W. LOT G9	CITY- ST- ZIP: BRADENTON FL	12 NAME: DONALD - BLACK	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VD	NAME: BENE, W.C.	13 STREET ADDRESS: 3528-14TH ST. W. LOT-E-14	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY- ST- ZIP: BRADENTON FL	TITLE: SD	14 CITY- ST- ZIP: BRADENTON, FL 34205	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: THOMAS, KATHRYN C.	STREET ADDRESS: 3528 14TH ST. W. LOT C16	21 TITLE: D BENE - F. KUBIAK	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
CITY- ST- ZIP: BRADENTON FL	TITLE: TD	22 NAME: 3528-14TH ST. W. J-6	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: BLOOM, RON	STREET ADDRESS: 3528 14TH ST W LOT B7	24 CITY- ST- ZIP: BRADENTON FL 34205	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
CITY- ST- ZIP: BRADENTON FL	TITLE: [] DELETE	31 TITLE: RALPH-GIERHART	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME: [] DELETE	STREET ADDRESS: [] DELETE	32 NAME: 3528 14TH ST. W. LOT-G9	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: [] DELETE	CITY- ST- ZIP: [] DELETE	33 STREET ADDRESS: BRADENTON, FL 34205	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY- ST- ZIP: [] DELETE	TITLE: [] DELETE	34 CITY- ST- ZIP: BRADENTON, FL 34205	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME: [] DELETE	STREET ADDRESS: [] DELETE	41 TITLE: D. BARBARA MORTON	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS: [] DELETE	CITY- ST- ZIP: [] DELETE	42 NAME: 3528 14TH ST. W. A-12	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY- ST- ZIP: [] DELETE	TITLE: [] DELETE	43 STREET ADDRESS: BRADENTON, FL 34205	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: [] DELETE	STREET ADDRESS: [] DELETE	44 CITY- ST- ZIP: BRADENTON, FL 34205	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: [] DELETE	CITY- ST- ZIP: [] DELETE	51 TITLE: [] DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY- ST- ZIP: [] DELETE	NAME: [] DELETE	52 NAME: [] DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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NAME: [] DELETE	TITLE: [] DELETE	61 TITLE: [] DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: [] DELETE	STREET ADDRESS: [] DELETE	62 NAME: [] DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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NAME: [] DELETE	NAME: [] DELETE	64 CITY- ST- ZIP: [] DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: [] DELETE	STREET ADDRESS: [] DELETE		
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Ralph Gierhart
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-15-96 941-747-7026

CR2E034 (12/95)