## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000000059

City-St-Zip:

MELBOURNE, FL 32934

FILED Jan 19, 2009 Secretary of State

Entity Name: PALMS WEST HOMEOWNERS ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** PALMS WEST HOMEOWNERS PALMS WEST HOMEOWNERS 3240 PAINTED BUNTING CT. 3241 PAINTED BUNTING CT. MELBOURNE, FL 32935 MELBOURNE, FL 32935 **Current Mailing Address: New Mailing Address:** 3241 PAINTED BUNTING CT MELBOURNE, FL 32934 FEI Number: 46-0480418 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: MOSS, JOEL S DUY, CLIF 3241 PAINTED BUNTING CT 47 W. NEW HAVEN AVE. MELBOURNE, FL 32934 MELBOURNE, FL 32901 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: CLIF DUY 01/19/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition DUY, CLIF E Name: Name: 3241 PAINTED BUNTING CT Address: Address: City-St-Zip: MELBOURNE, FL 32935 City-St-Zip: Title: TD ( ) Delete Title: () Change () Addition Name: DUY, JONI Name: Address: 3241 PAINTED BUNTING CT Address: City-St-Zip: MELBOURNE, FL 32934 City-St-Zip: ( ) Delete Title: Title: SD (X) Change ( ) Addition AHERN, KAY Name: AHERN, KAREN Name: 3240 PAINTED BUNTING CT 3240 PAINTED BUNTING CT Address: Address:

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.

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SIGNATURE: CLIF DUY PD 01/19/2009