

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003808

FILED
Apr 29, 2008
Secretary of State

Entity Name: PALMETTO TRACE COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

2827 JOAN AVE
SUITE B
PANAMA CITY BEACH, FL 32408 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 9247
PANAMA CITY BEACH, FL 32417 US

New Mailing Address:

FEI Number: 56-2282266

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SLOAN, TIMOTHY J
427 MCKENZIE ROAD
PANAMA CITY FL, FL 32402 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 () Delete
Name: MINNICK, MICHAEL
Address: 101 WINDSOR WAY
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: VD () Delete
Name: HONEYCUTT, DAVID
Address: 505 BAINBRIDGE STREET
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: STD () Delete
Name: RUTHERFORD, TOM
Address: 220 BILTMORE PLACE
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: D () Delete
Name: LAWRENCE, TRACY
Address: 103 WESTVIEW DRIVE
City-St-Zip: DOTHAN, AL 36301

Title: D () Delete
Name: TOLER, CHARLIE
Address: 104 BILTMORE PLACE
City-St-Zip: PANAMA CITY BEACH, FL 32413

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: TOLER, CHARLIE
Address: 104 BILTMORE PLACE
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: STD (X) Change () Addition
Name: BIDWELL, LOU
Address: 201 BAINBRIDGE STREET
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: THOMPSON, CHARLIE
Address: 117 PARK PLACE
City-St-Zip: PANAMA CITY BEACH, FL 32413

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.

SIGNATURE: MICHAEL MINNICK

PD

04/29/2008

Electronic Signature of Signing Officer or Director

Date