


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 28, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT #</b> N02000009317	
<b>1. Entity Name</b> VILLA PALM HOMEOWNERS ASSOCIATION, INC.	

<b>Principal Place of Business</b> % RICHARD PANETTA 249 CENTER STREET, UNIT 1C JUPITER, FL 33458	<b>Mailing Address</b> % RICHARD PANETTA 249 CENTER STREET, UNIT 1C JUPITER, FL 33458
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04082004 No Chg-NP CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

<b>4. FEI Number</b> NOT APPLICABLE	<b>Applied For</b> <input type="checkbox"/> Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

<b>6. Name and Address of Current Registered Agent</b>  NOSKA, FRANK T III 806 NORTH OLIVE WEST PALM BEACH, FL
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**DO NOT WRITE IN THIS SPACE**

**8.** 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. I am familiar with, and accept the obligations of registered agent.

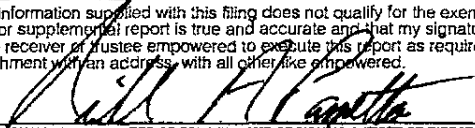
<b>SIGNATURE</b> <small>Signature typed or printed name of registered agent and file if applicable</small>	<small>(NOTE: Registered Agent signature required when reinstating)</small>	<b>DATE</b>
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<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2004</b>	<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	1100000134900 04/28/04-80037-025 61.25
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10. OFFICERS AND DIRECTORS	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	PVST PANETTA, RICHARD 249 CENTER STREET UNIT 1C WEST PALM BEACH, FL
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**12.** I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

<b>SIGNATURE:</b> 	<b>4/23/04</b> <small>Date</small>	<b>561-721-2972</b> <small>Daytime Phone #</small>
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