


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 13, 2008 8:00 am**  
**Secretary of State**

03-13-2008 90033 040 \*\*\*\*61.25

<b>DOCUMENT # N03000005218</b>					
1. Entity Name PALMA VISTA TOWNHOMES ASSOCIATION, INC.					
Principal Place of Business 4131 GUNN HIGHWAY TAMPA, FL 33618			Mailing Address 4131 GUNN HIGHWAY TAMPA, FL 33618		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 81-0621840	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
COTTERILL, RONALD 1010 NORTH FLORIDA AVENUE TAMPA, FL 33602			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			<b>FL</b>		Zip Code
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.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AMON, JOSEPH A		NAME		
STREET ADDRESS	4914 ANNISTON CIRCLE		STREET ADDRESS		
CITY-ST-ZIP	TAMPA, FL 33647		CITY-ST-ZIP		
TITLE	<del>VPD</del>	<input checked="" type="checkbox"/> Delete	TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<del>HARTER, BARBARA</del>		NAME	Rutherford, Joe	
STREET ADDRESS	<del>4902 ANNISTON CIRCLE</del>		STREET ADDRESS	4915 Anniston Circle	
CITY-ST-ZIP	<del>TAMPA, FL 33647</del>		CITY-ST-ZIP	Tampa, FL 33647	
TITLE	<del>FD</del>	<input checked="" type="checkbox"/> Delete	TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<del>CHRISTIANSON, MAUREEN</del>		NAME	Harris, B.J.	
STREET ADDRESS	<del>4920 ANNISTON CIRCLE</del>		STREET ADDRESS	4928 Anniston Circle	
CITY-ST-ZIP	<del>TAMPA, FL 33647</del>		CITY-ST-ZIP	Tampa, FL 33647	
TITLE	<del>D</del>	<input checked="" type="checkbox"/> Delete	TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<del>SPENCER, DAVID</del>		NAME	Novak, Mike	
STREET ADDRESS	<del>4084 ANNISTON CIRCLE</del>		STREET ADDRESS	4938 Anniston Circle	
CITY-ST-ZIP	<del>TAMPA, FL 33647</del>		CITY-ST-ZIP	Tampa, FL 33647	
TITLE		<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	Ward, Richard	
STREET ADDRESS			STREET ADDRESS	4973 Anniston Circle	
CITY-ST-ZIP			CITY-ST-ZIP	Tampa, FL 33647	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.					
SIGNATURE: <i>William J. Harris</i>			Date: <i>3/5/08</i> 813-		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		