2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# N03435

Entity Name: PALM CLUB HOMEOWNER ASSOCIATION, INC.

Current Principal Place of Business:

C/O BANYAN PROPERTY MANGEMENT, INC
2328 SOUTH CONGRESS AVE SUITE1-C
WEST PALM BEACH, FL 33406 US

New Principal Place of Business:

Current Mailing Address:

C/0 BANYAN PROPERTY MANAGEMENT, INC
2328 SOUTH CONGRESS AVE SUTIE1-C
WEST PALM BEACH, FL 33406 US

New Mailing Address:

FEI Number: 59-2534812 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HILLEY, V. DONALD PA
860 US HIGHWAY ONE
STE 108
NORTH PALM BEACH, FL 33408 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: ZAHN, ELISE J
Address: 1217 PINE SAGE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: STD ( ) Delete
Name: SCHWENGER, ALLISON
Address: 1217 PINE SAGE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: D ( ) Delete
Name: BOOTH, MELISSA
Address: 1247 PINE SAGE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: VD ( ) Delete
Name: MITCHELL, MARGARET
Address: 1225 PINE SAGE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: D ( ) Delete
Name: BAKER, CARL
Address: 1265 PINE SAGE CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33409

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: ELIZE ZAHN PD 04/27/2009
Electronic Signature of Signing Officer or Director — Date