

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03972

FILED
Apr 09, 2009
Secretary of State

Entity Name: PALM ISLAND VILLAGE II PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

7092 PLACIDA ROAD
CAPE HAZE, FL 33946 US

New Principal Place of Business:

Current Mailing Address:

7092 PLACIDA RD
CAPE HAZE, FL 33946

New Mailing Address:

7092 PLACIDA ROAD
CAPE HAZE, FL 33946 US

FEI Number: 59-2450218

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REMOUR, CRAIG
7092 PLACIDA RD
CAPE HAZE,, FL 33946 US

Name and Address of New Registered Agent:

REMOUR, CRAIG A
7092 PLACIDA RD
CAPE HAZE, FL 33946 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: CRAIG A. REMOUR

04/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HODGSON, JOHN
Address: 370 MAIN STREET., SUITE 1250
City-St-Zip: WORCESTER, MA 01608

Title: T () Delete
Name: CLIFF, KEMP
Address: 346 EVANS DALE RD
City-St-Zip: LAKE MARY, FL 32746

Title: S () Delete
Name: ANDERSON, ART
Address: 2301 SUNSET BLVD
City-St-Zip: MINNEAPOLIS, MN 55416

Title: VP () Delete
Name: SMELTZER, RICHARD
Address: 406 PINE HURST
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: D () Delete
Name: PETRIE, JODIE
Address: 1116 IRON SPRINGS CT
City-St-Zip: INDIANAPOLIS, IN 34624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HODGSON, JOHN
Address: 370 MAIN STREET, SUITE 1250
City-St-Zip: WORCESTER, MA 01608 US

Title: T (X) Change () Addition
Name: KEMP, CLIFF
Address: 346 EVANS DALE RD
City-St-Zip: LAKE MARY, FL 32746 US

Title: S (X) Change () Addition
Name: ANDERSON, ARTHUR
Address: 2901 SUNSET BLVD
City-St-Zip: MINNEAPOLIS, MN 55416 US

Title: D (X) Change () Addition
Name: MINOR, JOHN
Address: 745 HURSTBORNE LANE
City-St-Zip: EDGEWOOD, KY 41017 US

Title: D (X) Change () Addition
Name: PETRIE, JODIE
Address: 1757 MILFORD STREET
City-St-Zip: CARMEL, IN 46032 US

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: CRAIG A. REMOUR

MGR

04/09/2009

Electronic Signature of Signing Officer or Director

Date