

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001287

FILED
Mar 04, 2009
Secretary of State

Entity Name: PALMAS DE MALLORCA CONDOMINIUM OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

4536 S CLYDE MORRIS BLVD
SUITE 2
PORT ORANGE, FL 32129

New Principal Place of Business:

3811 SOUTH ATLANTIC AVENUE
DAYTONA BEACH SHORES, FL 32127

Current Mailing Address:

4536 S CLYDE MORRIS BLVD
SUITE 2
PORT ORANGE, FL 32129

New Mailing Address:

PO BOX 2900
GAINESVILLE, FL 32602

FEI Number: 20-8529028

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMON, URSULA
211 E. INTERNATIONAL SPEEDWAY BOULEVARD
DAYTONA BEACH, FL 32118 US

Name and Address of New Registered Agent:

MCGURN, LINDA C
101 SE 2ND PLACE
202
GAINESVILLE, FL 32601 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: LINDA C. MCGURN

03/04/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: AMON, FELIX
Address: 211 E. INTERNATIONAL SPEEDWAY BLVD.
City-St-Zip: DAYTONA BCH, FL 32118

Title: STD () Delete
Name: AMON, URSULA
Address: 211 E. INTERNATIONAL SPEEDWAY BLVD.
City-St-Zip: DAYTONA BCH, FL 32118

Title: VD () Delete
Name: HUBBS, GARY
Address: 4207 SOUTH ATLANTIC AVE.
City-St-Zip: PORT ORANGE, FL 32127

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: LACOUR, ERNEST V
Address: 220 CHARLES STREET
City-St-Zip: PORT ORANGE, FL 32129

Title: STD (X) Change () Addition
Name: MCGURN, LINDA C
Address: 101 SE 2ND PLACE #202
City-St-Zip: GAINESVILLE, FL 32601

Title: VD (X) Change () Addition
Name: SHAPIRO, RON
Address: 3811 S ATLANTIC AVENUE # 102
City-St-Zip: DAYTONA BEACH SHORES, FL 32127

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: LINDA C. MCGURN

DST

03/04/2009

Electronic Signature of Signing Officer or Director

Date