

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000005208

FILED  
Jan 31, 2008  
Secretary of State

Entity Name: PALMONA PARK IMPROVEMENT ASSOCIATION, INC.

**Current Principal Place of Business:**

4008 WHOLESALE CT  
N FORT MYERS, FL 33903

**New Principal Place of Business:**

423 ELLIS STREET  
N FORT MYERS, FL 33903

**Current Mailing Address:**

4008 WHOLESALE CT  
N FORT MYERS, FL 33903

**New Mailing Address:**

4008 WHOLESALE COURT  
N FORT MYERS, FL 33903

FEI Number: 26-0087169      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

LITTEN, DONNA A  
423 ELLIS STREET  
N. FT. MYERS, FL 33903      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: DONN A A. LITTEN

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P,D      ( ) Delete  
Name: LITTEN, DONNA  
Address: 423 ELLIS ST  
City-St-Zip: N FORT MYERS, FL 33903

Title: VP D      ( ) Delete  
Name: ROMER, JACQUIE  
Address: 320 REDLIN STREET  
City-St-Zip: N FORT MYERS, FL 33903

Title: D      ( ) Delete  
Name: RAPERT, FOREST J  
Address: 320 REDLIN STREET  
City-St-Zip: N FORT MYERS, FL 33903

Title: T, D      ( ) Delete  
Name: SULLIVAN, SHIRLEY  
Address: 239 CLARK ST  
City-St-Zip: N FORT MYERS, FL 33903

Title: D      ( ) Delete  
Name: LITTEN, MAX E  
Address: 423 ELLIS STREET  
City-St-Zip: N. FT. MYERS, FL 33903

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D      (X) Change ( ) Addition  
Name: BOBENHAFFER, MARY  
Address: 441 CLARK STREET  
City-St-Zip: NORTH FT. MYERS, FL 33903 US

Title: D      (X) Change ( ) Addition  
Name: BOBENHAFFER, CLIFFORD B  
Address: 441 CLARK STREET  
City-St-Zip: N FORT MYERS, FL 33903

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: DONNA A. LITTEN

Electronic Signature of Signing Officer or Director

P

01/31/2008

Date