## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000001035

FILED Feb 16, 2006 Secretary of State

Entity Name: LONE PALM HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1045 PRESTWICK PL. 12784 LONE PALM COURT

DUNEDIN, FL 34698 LARGO, FL 33773

Current Mailing Address: New Mailing Address:

1045 PRESTWICK PL. 12784 LONE PALM COURT

DUNEDIN, FL 34698 LARGO, FL 33773

FEI Number: 65-1248702 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MENDEL, RAY

1045 PRESTWICK PL.

OLIVER, JAMES
12784 LONE PALM COURT

1045 PRESTWICK PL. 12784 LONE PALM COURT DUNEDIN, FL 34698 US LARGO, FL 33773 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: JAMES OLIVER 02/16/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P () Delete Title: P (X) Change () Addition

Name: MENDEL, RAY Name: OLIVER, JIM
Address: 1045 PRESTWICK PL. Address: 12731 LONE PALM COURT

City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: LARGO, FL 33773

Title: VP ( ) Delete Title: T (X) Change ( ) Addition Name: CIAMPINI, JOHN Name: CHRISTOPHER, WILLIAM Address: 708 ELDORADO AVE Address: 12687 LONE PALM COURT

Address: 708 ELDORADO AVE Address: 12687 LONE PALM CC City-St-Zip: CLEARWATER BEACH, FL 33769 City-St-Zip: LARGO, FL 33772

Title: ST () Delete Title: SVP (X) Change () Addition

 Name:
 ERWIN, JIM
 Name:
 BOROWICZ, KIM

 Address:
 635 N BAYSHORE DR.
 Address:
 12631 LONE PALM COURT

City-St-Zip: SAFETY HARBOR, FL 34695 City-St-Zip: LARGO, FL 33773

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES OLIVER P 02/16/2006