## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05515

FILED Mar 27, 2008 Secretary of State

Entity Name: FLAGLER COUNTY - PALM COAST HOMEBUILDERS ASSOCIATION, INC.

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

1 HARGROVE GRADE

SUITE 1F

PALM COAST, FL 32137

**New Mailing Address: Current Mailing Address:** 

1 HARGROVE GRADE

SUITE 1F

PALM COAST, FL 32137 US

FEI Number: 59-2472409 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:

PETERSON, DEBRA 1 HARGROVE GRADE SUITE 1F PALM COAST, FL 32137 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:

Date

Electronic Signature of Registered Agent

**OFFICERS AND DIRECTORS:** 

() Delete RINEK, CHARLES PAST PR

Name:

50 CYPRESS POINT PKWY., SUITE A-1 Address:

City-St-Zip: PALM COAST, FL 32164 US

Title: ( ) Delete BOBACK, JOHN PRES Name:

Address: PO BOX 668

City-St-Zip: FLAGLER BEACH, FL 32136 US

Title: () Delete AMARAL, JR., ANTONIO VP Name:

13 UTILITY DRIVE Address:

City-St-Zip: PALM COAST, FL 32137 US

Title: (X) Delete MEDEIROS, LUIS TREAS Name:

Address: 3 COURTNEY PLACE City-St-Zip: PALM COAST, FL 32137 US ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

RINEK, CHARLES TREAS Name:

Address: 50 CYPRESS POINT PKWY., SUITE A-1

City-St-Zip: PALM COAST, FL 32164 US

Title: (X) Change ( ) Addition Name: AMARAL, JR., ANTONIO PRES

Address: 13 UTILITY DRIVE

City-St-Zip: PALM COAST, FL 32137 US

Title: (X) Change ( ) Addition

MEDEIROS, LUIS VP Name: Address: 3 COURTNEY PLACE City-St-Zip: PALM COAST, FL 32137 US

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: DEBRA PETERSON CEO 03/27/2008