


2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

(of 2)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 MAY 22 AM 11:49

DOCUMENT # N06000002909 1. Entity Name PALM HARBOR PARK HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 7175 S. US HWY. ONE #54 TITUSVILLE, FL 32780			Mailing Address 7175 S. US HWY. ONE #54 TITUSVILLE, FL 32780		
2. Principal Place of Business - No P.O. Box # 7175 So. US Hwy. ONE		3. Mailing Address PO BOX			
Suite, Apt. #, etc. #55		Suite, Apt. #, etc.			
City & State Titusville, FL		City & State SHARPE, FL		4. FEI Number 77-0657824	
Zip 32780		Country BREVARD		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 32959		Country BREVARD		Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent REID, EMILE 7175 S. US HWY. ONE #54 TITUSVILLE, FL 32780			7. Name and Address of New Registered Agent Name FRANK MURRELLE Street Address (P.O. Box Number is Not Acceptable) 7175 So. US Hwy. ONE #55 City Titusville FL Zip Code 32780		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <i>Frank M. Murrelle Jr.</i> <small>Signature, typed or printed name of registered agent and title applicable.</small>			Frank M. Murrelle Jr. <small>(NOTE: Registered Agent signature required when reinstating)</small>		
Amended AR is \$61.25			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ODOM, ARIANA 7175 S. US HWY. ONE TITUSVILLE, FL 32780	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DALTON, CINDY 7175 S. US HWY. ONE TITUSVILLE, FL 32780	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD REID, EMILE 7175 S. US HWY. ONE TITUSVILLE, FL 32780	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KENNEDY, RICHARD 7175 S. US HWY. ONE TITUSVILLE, FL 32780	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D POLLARD, BILLIE 7175 S. US HWY. ONE TITUSVILLE, FL 32780	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DOUGLAS, MARH 7175 S. US HWY. ONE TITUSVILLE, FL 32780	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C/D/T FRANK MURRELLE 7175 So. US Hwy. 1 #55 Titusville, FL 32780				
900130677409 06/03/08--01017--018 **\$61.25					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE <i>Frank M. Murrelle Jr.</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Frank M. Murrelle Jr. <small>Date</small>		
5-16-08			5-16-08		

5/27 ew

ATTACHMENT

2022

Officers and Directors:

#NO6000002909

Column 10

Column 11

DELETE

D

Pat London

7175 S. US Hwy.1, # 70

Titusville, FL 32780

ADDITION

D

Richard Shafer

7175 S. US Hwy. 1 # 29

Titusville, FL 32780