

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003177

FILED
Apr 11, 2007
Secretary of State

Entity Name: THE FALLS OF PALM BAY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

614 E. NEW HAVEN AVENUE
MELBOURNE, FL 32901

New Principal Place of Business:

121 DEADWOOD LANE SW
PALM BAY, FL 32908

Current Mailing Address:

614 E. NEW HAVEN AVENUE
MELBOURNE, FL 32901

New Mailing Address:

121 DEADWOOD LANE SW
PALM BAY, FL 32908

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURTHA, KEVIN M
7640 NORTH WICKHAM ROAD
SUITE 121
MELBOURNE, FL 32940 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MASONE, ANTHONY N
Address: 614 E. NEW HAVEN AVENUE
City-St-Zip: MELBOURNE, FL 32901

Title: VP () Delete
Name: WITHEROW, DENNIS J
Address: 614 E. NEW HAVEN AVENUE
City-St-Zip: MELBOURNE, FL 32901

Title: T () Delete
Name: HANDA, SUNDEEP
Address: 614 E. NEW HAVEN AVENUE
City-St-Zip: MELBOURNE, FL 32901

Title: S () Delete
Name: MURTHA, KEVIN M
Address: 7640 NORTH WICKHAM ROAD, SUITE 121
City-St-Zip: MELBOURNE, FL 32940

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MASONE, ANTHONY N
Address: 121 DEADWOOD LANE SW.
City-St-Zip: PALM BAY, FL 32908

Title: VP (X) Change () Addition
Name: WITHEROW, DENNIS J
Address: 121 DEADWOOD LANE SW
City-St-Zip: PALM BAY, FL 32908

Title: P (X) Change () Addition
Name: HANDA, SUNDEEP
Address: 121 DEADWOOD LANE SW
City-St-Zip: PALM BAY, FL 32908

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

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: SUNDEEP HANDA

P

04/11/2007

Electronic Signature of Signing Officer or Director

Date