

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Jan 08, 2007  
Secretary of State

DOCUMENT# N06000004409

Entity Name: THE PALMS OF INDIAN RIVER ESTATES HOMEOWNERS ASSOCIATION INC.

**Current Principal Place of Business:**

2601 OKLAHOMA STREET  
WEST MELBOURNE, FL 32904

**New Principal Place of Business:**

**Current Mailing Address:**

2601 OKLAHOMA STREET  
WEST MELBOURNE, FL 32904

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

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

AUSTIN, STEVE  
409 PELICAN KEY  
MELBOURNE BEACH, FL 32951      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:                      D                      ( ) Delete  
Name:                      AUSTIN, STEVEN  
Address:                      409 PELICAN KY  
City-St-Zip:                      MELBOURNE BEACH, FL 32951

Title:                      D                      ( ) Delete  
Name:                      BUCHMAN, BILL  
Address:                      2601 OKLAHOMA STREET  
City-St-Zip:                      WEST MELBOURNE, FL 32904

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

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 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: STEVEN AUSTIN

D

01/08/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date