

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 08, 2007 8:00 am
Secretary of State

03-08-2007 90017 050 ****70.00

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1. Entity Name

LAS PALMAS CONDOMINIUM ASSOCIATION OF
JACKSONVILLE, INC.



Principal Place of Business

Mailing Address

3517 PEELER ROAD
#15
JACKSONVILLE FL 32277

6200 CREETOWN DRIVE
JACKSONVILLE FL 32216



2. Principal Place of Business - No P.O. Box #

3517 Peeler Rd.

Suite, Apt. #, etc.

#20

City & State

Jacksonville, FL

Zip

32277

Country

Duval

3. Mailing Address

3517 Peeler Rd.

Suite, Apt. #, etc.

#20

City & State

Jacksonville, FL

Zip

32277

Country

Duval

1st MOORE

CR2E037 (10/06)

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MANGRUM, DON
6200 CREETOWN DRIVE
JACKSONVILLE FL 32216

7. Name and Address of New Registered Agent

Name

Gregory Pagel
Street Address (P.O. Box Number is Not Acceptable)

3517 Peeler Rd.

#20

City

Jacksonville

FL

Zip Code

32277

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

Gregory Pagel

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered agent signature required when reinstating)

2-25-07

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE P
NAME BEDO, LINDA
STREET ADDRESS 3517 PEELER ROAD UNIT 15
CITY-ST-ZIP JACKSONVILLE FL 32277 ☒ Delete

TITLE VP
NAME LANG, HARRY
STREET ADDRESS 3517 PEELER ROAD UNIT 24
CITY-ST-ZIP JACKSONVILLE FL 32277 ☒ Delete

TITLE T
NAME MANGRUM, DON
STREET ADDRESS 6200 CREETOWN DRIVE
CITY-ST-ZIP JACKSONVILLE FL 32216 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P
NAME Gregory Pagel
STREET ADDRESS 3517 Peeler Rd. Unit #20
CITY-ST-ZIP Jacksonville, FL 32277 ☒ Change ☐ Addition

TITLE VP
NAME Brianna Graves
STREET ADDRESS 3517 Peeler Rd Unit #11
CITY-ST-ZIP Jacksonville, FL 32277 ☒ Change ☐ Addition

TITLE T
NAME Linda K. Bedo
STREET ADDRESS 3517 Peeler Rd Unit 15
CITY-ST-ZIP Jacksonville, FL 32277 ☒ Change ☐ Addition

TITLE S
NAME Mathew Graves
STREET ADDRESS 3517 Peeler Rd. Unit #11
CITY-ST-ZIP Jacksonville, FL 32277 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Gregory Pagel

Gregory Pagel

2-25-07