

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009054

FILED  
May 01, 2007  
Secretary of State

**Entity Name:** THE PALMS OF BELLEAIR CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

675 INDIAN ROCK RD.  
BELLEAIR BLUFFS, FL 33770

**New Principal Place of Business:**

**Current Mailing Address:**

675 INDIAN ROCK RD.  
BELLEAIR BLUFFS, FL 33770

**New Mailing Address:**

P.O. BOX 514  
INDIAN ROCKS BEACH, FL 33785

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

STANLEY, BRYAN J ESQ.  
114 TURNER ST.  
CLEARWATER, FL 33756      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: PD                      ( ) Delete  
Name: DANIELSON, BRUCE  
Address: 1433 FT. HARRISON AVE., SUITE D  
City-St-Zip: CLEARWATER, FL 33756

Title: VD                      ( ) Delete  
Name: STOBER, ERIC  
Address: 1433 FT. HARRISON AVE., SUITE D  
City-St-Zip: CLEARWATER, FL 33756

Title: SD                      ( ) Delete  
Name: ZUCKERMAN, RALPH  
Address: 905 M.L. KING JR., DR., SUITE 250  
City-St-Zip: TARPON SPRINGS, FL 34689

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

Title: PD                      (X) Change ( ) Addition  
Name: DANIELSON, BRUCE  
Address: 231 INDIAN ROCKS ROAD  
City-St-Zip: BELLEAIR BLUFFS, FL 33770

Title: VD                      (X) Change ( ) Addition  
Name: STOBER, ERIC  
Address: 231 INDIAN ROCKS ROAD  
City-St-Zip: BELLEAIR BLUFFS, FL 33770

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: BRUCE DANIELSON

P

05/01/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date