


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 08:00 AM
Secretary of State

DOCUMENT # N06868

1. Entity Name
PALAMAR OAKS VILLAS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address

4117 NEPTUNE RD **4117 NEPTUNE RD.**
ST. CLOUD, FL 34769 US **ST. CLOUD, FL 34769 US**

DO NOT WRITE IN THIS SPACE



03062006 No Chg-NP CR2E037 (11/05)

4. FEI Number Applied For
NOT APPLICABLE Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

COOPER, DENNIS
4117 NEPTUNE ROAD
SAINT CLOUD, FL 34769

DO NOT WRITE IN THIS SPACE

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: *[Signature]* *Treasurer* DATE

Signature, typed or printed name of registered agent and title (if applicable) (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

U00000490674
 04/18/06-80067-005 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DRAWDY, THERESA 4105 NEPTUNE ROAD SAINT CLOUD, FL 34769
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JONES, RODNEY 4109 NEPTUNE ROAD SAINT CLOUD, FL 34769
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COOPER, DENNIS 4117 NEPTUNE RD. SAINT CLOUD, FL 34769
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: *Dennis A. Cooper* *3-30-06*