

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000012135

FILED
Mar 26, 2009
Secretary of State

Entity Name: PALAZZO OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1960 STONEGATE DRIVE
BIRMINGHAM, AL 35242

New Principal Place of Business:

17281 FRONT BEACH ROAD
PANAMA CITY BEACH, FL 32413

Current Mailing Address:

1960 STONEGATE DRIVE
BIRMINGHAM, AL 35242

New Mailing Address:

546 MARY ESTHER CUTOFF, STE 3
FT. WALTON BEACH, FL 32548

FEI Number: 42-1750235

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRAEMER, MARY K
4475 LEGENDARY DRIVE
DESTIN, FL 32541 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: DP () Delete
Name: DURHAM, RONALD O
Address: 1960 STONEGATE DRIVE
City-St-Zip: BIRMINGHAM, AL 35242

Title: DVP () Delete
Name: BRANDON, GARY L
Address: PO BOX 21
City-St-Zip: SPRINGDALE, AR 72765

Title: DST () Delete
Name: RUSSELL, ADAM
Address: 2311 MAGNOLIA AVE
City-St-Zip: PENSACOLA, FL 32501

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DST (X) Change () Addition
Name: SAMETZ, STEPHEN
Address: 4041 INDIAN BAYOU N
City-St-Zip: DESTIN, FL 32541

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: TOM NELSON

MGER

03/26/2009

Electronic Signature of Signing Officer or Director

Date