

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000008042

FILED
Mar 02, 2012
Secretary of State

Entity Name: THE PALM TREE SANTAS, INC.

Current Principal Place of Business:

17604 WILLOW CREEK BLVD
LUTZ, FL 33549

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 272852
TAMPA, FL 33688

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:

WILLIAMS, JAMES
4228 GOLF CLUB LANE
TAMPA, FL 33618 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/P
Name: ELKIN, ROBERT
Address: P.O. BOX 272852
City-St-Zip: TAMPA, FL 33688

Title: D/V
Name: WILLIAMS, JAMES
Address: 4228 GOLF CLUB LANE
City-St-Zip: TAMPA, FL 33618

Title: D/V
Name: POLLARD, DENNIS
Address: 440 TURKEY CREEK DR.
City-St-Zip: ALACHUA, FL 32615

Title: D/T
Name: BARE, KATHRYN
Address: 3441 NE 48TH AVE
City-St-Zip: HIGH SPRINGS, FL 32643

Title: D/SE
Name: KRAATZ, MARLENE
Address: 4016 WILLIAM HUME DR
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: D
Name: GALLAGHER, DAN
Address: 14538 BASILHAM LANE
City-St-Zip: JACKSONVILLE, FL 32258

I hereby 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 all other like empowered.

SIGNATURE: KATHRYN A BARE

TREA

03/02/2012

Electronic Signature of Signing Officer or Director

Date