

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 13, 2007
Secretary of State**

DOCUMENT# N11024

Entity Name: PALM COURT HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

% NEWELL PROPERTY MANAGEMENT
5435 JAEGER RD. #4
NAPLES, FL 34109 US

New Principal Place of Business:

Current Mailing Address:

% NEWELL PROPERTY MANAGEMENT
5435 JAEGER RD. #4
NAPLES, FL 34109 US

New Mailing Address:

FEI Number: 59-2583712 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWELL, WILLIAM
5435 JAEGER ROAD #4
NAPLES, FL 34109 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: TEWKSBURY, THOMAS
Address: 230 6TH AVENUE SOUTH
City-St-Zip: NAPLES, FL 34102

Title: VD () Delete
Name: SILVERMAN, PERRY
Address: 224 SIXTH AVENUE SOUTH
City-St-Zip: NAPLES, FL 34102

Title: STD () Delete
Name: SCHMID, ELKE
Address: 272 SIXTH AVENUE SOUTH
City-St-Zip: NAPLES, FL 34102

Title: D () Delete
Name: O'KEEFE, JUNE
Address: 260 SIXTH AVENUE SOUTH
City-St-Zip: NAPLES, FL 34102

Title: D (X) Delete
Name: BEATTY, JIM
Address: 212 6TH AVENUE SOUTH
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D (X) Change () Addition
Name: BEATTY, JIM
Address: 212 6TH AVENUE SOUTH
City-St-Zip: NAPLES, FL 34102

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

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS TEWKSBURY

PD

03/13/2007

Electronic Signature of Signing Officer or Director

Date