

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 26, 2006 8:00 am
Secretary of State

05-26-2006 90015 021 ****70.00

DOCUMENT # N16600 1. Entity Name SOUTHERN PALMS CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 1521 SW 47TH TERR 101 CAPE CORAL, FL 33914			Mailing Address 1521 SW 47TH TERR APT 101 CAPE CORAL, FL 33914 US		
2. Principal Place of Business 1521 SW 47th Ter Suite, Apt. #, etc. 203 City & State Cape Coral, FL Zip 33914 Country USA			3. Mailing Address 1521 SW 47th Ter Suite, Apt. #, etc. 203 City & State Cape Coral, FL Zip 33914 Country USA		
4. FEI Number 65-0156620			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input checked="" type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent LAMARITATA, DIANE 1521 SW 47TH TERRACE APT 101 CAPE CORAL, FL 33914			7. Name and Address of New Registered Agent Name Richard Rushman Street Address (P.O. Box Number is Not Acceptable) 1521 SW 47th Ter #203 City Cape Coral FL Zip Code 33914		
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 DATE 5-15-06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LAMARITATA, DIANE F <input checked="" type="checkbox"/> Delete 1521 SW 47TH TERR APT 101 CAPE CORAL, FL 33914		TITLE NAME STREET ADDRESS CITY-ST-ZIP	President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Eugene Kelly 12 Hemingway Dr North Brunswick, NJ 08902	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input checked="" type="checkbox"/> Delete PIERCE, SUSAN 284 FISHER RD GROSSE POINTE, MI 48230		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Terri Danderian 39 Gillen Ave North Providence, RI 02904	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <input checked="" type="checkbox"/> Delete SASSO, LYNN 1421 SW 21 SERR. CAPE CORAL, FL 33991		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary <input type="checkbox"/> Change <input type="checkbox"/> Addition John E Pierce 18530 Mack #378 Grosse Pointe Farms MI 48236	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD <input type="checkbox"/> Delete RUSHMAN, RICHARD 1521 SW 47TH TERR APT 203 CAPE CORAL, FL 33914		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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:			S-14-06 4017247463		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		

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