2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17079

Address:

City-St-Zip:

FILED Apr 09, 2009 Secretary of State

Entity Name: THE HOMEOWNERS' ASSOCIATION OF THE PALMS, INC.

Current Principal Place of Business: New Principal Place of Business: UNIVERSITY PROP INC 7001 TEMPLE TERRACE HWY TEMPLE TERRACE, FL 33637 US **New Mailing Address: Current Mailing Address:** UNIVERSITY PROP 7001 TEMPLE TERRACE TEMPLE TERRACE, FL 33637 US FEI Number: 59-2721297 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WESTERMAN, MARIELLE ESQ DUARTE, ANTONIO 215 W VERNE ST STE A 6221 LAND O' LAKES BLVD. TAMPA, FL 33606 LAND O' LAKES, FL 34639 US 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: ANTONIO DUARTE 04/09/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition SHACK, CARL JR GLASS, STAN Name: Name: 1647 PROW MORE DR Address: 1717 OAK BRANCH COURT Address: City-St-Zip: BRANDON, FL 33511 City-St-Zip: BRANDON, FL 33511 Title: VD () Delete Title: () Change () Addition POWERS, EVELYN Name: Name: Address: 1631 PROW MORE DR Address: City-St-Zip: BRANDON, FL 33511 City-St-Zip: Title: () Delete Title: () Change () Addition HUNT, RANDY Name: Name: Address: 854 BURLWOOD ST Address: City-St-Zip: BRANDON, FL 33511 City-St-Zip: Title: () Delete Title: () Change (X) Addition Name: Name: SANCHEZ, SAMUEL 708 BURLWOOD Address: Address: City-St-Zip: City-St-Zip: BRANDON, FL 33511 Title: D/S () Delete Title: () Change (X) Addition BAKER, MICHELLE Name: Name: 743 BURLWOOD Address: Address: City-St-Zip: City-St-Zip: BRANDON, FL 33511 Title: () Delete Title: () Change (X) Addition GEORGE, SYLVIA Name: Name:

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.

Address:

City-St-Zip:

1708 PAINT BRANCH WAY BRANDON, FL 33511

SIGNATURE: STAN GLASS PRES 04/09/2009