

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20989

FILED
Apr 22, 2010
Secretary of State

Entity Name: BUCKEYE PALMS, INC.

Current Principal Place of Business:

400 VALLEY STREAM DR.
ASSOCIATION BOX
NAPLES, FL 34113 US

New Principal Place of Business:

Current Mailing Address:

400 VALLEY STREAM DR.
ASSOCIATION BOX
NAPLES, FL 34113 US

New Mailing Address:

FEI Number: 59-3700805

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEHMAN, CHARLES C
5455 JAEGER RD
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: D
Name: VOUGHT, DONALD
Address: 400 VALLEY STREAM DR. #205
City-St-Zip: NAPLES, FL 34113 US

Title: P D
Name: SOLO, LEONARD
Address: 400 VALLEY STREAM DR #106
City-St-Zip: NAPLES, FL 34113

Title: ST D
Name: TEXTER, EUGENE
Address: 400 VALLEY STREAM DRIVE #105
City-St-Zip: NAPLES, FL 34113

Title: D
Name: DOTALO, JAMES
Address: 400 VALLEY STREAM DR. #109
City-St-Zip: NAPLES, FL 34113 US

Title: D
Name: HOUCK, MARTHA
Address: 400 VALLEY STREAM DRIVE #205
City-St-Zip: NAPLES, FL 34113

Title: VP D
Name: WATKINS, ALLISON
Address: 400 VALLEY STREAM DRIVE #202
City-St-Zip: NAPLES, FL 34113

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: EUGENE TEXTER

SECR

04/22/2010

Electronic Signature of Signing Officer or Director

_____ Date