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FILED  
Jul 28 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N24972 (4)

1. Corporation Name

PALM LAKE OF NAPLES HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

3131 E TAMiami TRAIL  
STE 55  
NAPLES FL 33962  
US

3131 E TAMiami TRAIL  
LOT 85  
NAPLES FL 34112-5786  
US



2. Principal Place of Business

2a. Mailing Address

21 3131 E. TAMiami TRAIL

26 3131 E. TAMiami TRAIL

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 NOT 53

27 LOT 49

City & State

City & State

23 NAPLES FL

28 NAPLES FL

Zip

Country

Zip

Country

24 34112

25

29 34112

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WARD, GEORGE  
3131 E TAMiami TRAIL  
STE 58  
NAPLES FL 33962

81 Name

MIRELLA TORRES

82 Street Address (P.O. Box Number is Not Acceptable)

3131 E. TAMiami TRAIL #49

83

PALM LAKE OF NAPLES HOMEOWNERS ASSOCIATION, INC.

84

NAPLES

FL

Zip Code

34112

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *George Ward*

5-19-97

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DT ☒ DELETE

NAME CAMERO, ABEL  
STREET ADDRESS 3131 E TAMiami TRAIL 55  
CITY-ST-ZIP NAPLES FL

1.1 TITLE *D/T* ☒ Change ☐ Addition

1.2 NAME *MILDRED SIELOFF #133*  
1.3 STREET ADDRESS 3131 E. TAMiami TRAIL  
1.4 CITY-ST-ZIP NAPLES FL 34112

TITLE DP ☒ DELETE

NAME WARD, GEORGE  
STREET ADDRESS 3131 EAST TAMiami TRAIL #58  
CITY-ST-ZIP NAPLES FL

2.1 TITLE *D/P* ☒ Change ☐ Addition

2.2 NAME *MIRELLA TORRES*  
2.3 STREET ADDRESS 3131 E. TAMiami TRAIL #49  
2.4 CITY-ST-ZIP NAPLES FL 34112

TITLE DS ☐ DELETE

NAME CAMIO, JOSIE  
STREET ADDRESS 3131 EAST TAMiami TRAIL #51  
CITY-ST-ZIP NAPLES FL

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE VD ☒ DELETE

NAME STOCKER, JENNY  
STREET ADDRESS 3131 EAST TAMiami TRAIL #60  
CITY-ST-ZIP NAPLES FL

4.1 TITLE *D/V* ☐ Change ☐ Addition

4.2 NAME *SARINO MARENGO*  
4.3 STREET ADDRESS 3131 E. TAMiami TRAIL #31  
4.4 CITY-ST-ZIP NAPLES FL 34112

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)