

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 29, 2008 8:00 am
Secretary of State

05-29-2008 90191 047 ****61.25

DOCUMENT # N33952 1. Entity Name PALM COURT RECREATION ASSOCIATION, INC.					
Principal Place of Business 310 PEARL AVE SARASOTA, FL 34243 US			Mailing Address DELLCOR MANAGEMENT 310 PEARL AVE SARASOTA, FL US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
DANIEL DELL'ARMI DELLCOR MANAGEMENT 310 PEARL AVE SARASOTA, FL 34243				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2008		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	D <input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUSSO, JOHN			NAME	
STREET ADDRESS	4707 61ST AVE DR W			STREET ADDRESS	
CITY-ST-ZIP	BRADENTON, FL 34210			CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete			TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CRAWFORD, ROBERT			NAME	CRAWFORD, ROBERT
STREET ADDRESS	4805 61ST AVE DR W			STREET ADDRESS	4805 61ST AVE DR. W.
CITY-ST-ZIP	BRADENTON, FL 34210			CITY-ST-ZIP	BRADENTON FL 34210
TITLE	D <input type="checkbox"/> Delete			TITLE	VPD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PATTERSON, WILLIAM			NAME	PATTERSON, WILLIAM
STREET ADDRESS	4903 61ST AVE DR. W			STREET ADDRESS	4903 61ST AVE DR W.
CITY-ST-ZIP	BRADENTON, FL 34210			CITY-ST-ZIP	BRADENTON, FL 34210
TITLE	<input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
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: _____				Date 4/29/08 Daytime Phone # 941 358-3366	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					