2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36452

FILED Mar 10, 2011 Secretary of State

Entity Name: PALMAVISTA CONDOMINIUM ASSOCIATION OF HILLSBOROUGH COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business:

5901 US HIGHWAY 19 C/O QUALIFIED PROPERTY MGMT INC

5901 US HWY 19, STE 7Q 70

NEW PORT RICHEY, FL 34652 US NEW PORT RICHEY, FL 34652 US

New Mailing Address: **Current Mailing Address:**

5901 US HIGHWAY 19 C/O QUALIFIED PROPERTY MGMT INC 5901 US HWY 19, STE 7Q

NEW PORT RICHEY, FL 34652 US NEW PORT RICHEY, FL 34652 US

FEI Number: 59-3117200 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:

QUALIFIED PROPERTY MANAGEMENT, INC. 5901 US HIGHWAY 19

NEW PORT RICHEY, FL 34652 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

BAUMAN, SEAN Name:

Address: 5901 US HIGHWAY 19, SUITE 7Q City-St-Zip: NEW PORT RICHEY, FL 34652

Title:

Name: MCLYMONT, ROB

Address: 5901 US HIGHWAY 19, SUITE 7Q City-St-Zip: NEW PORT RICHEY, FL 34652

Title: SD

BAUMANN, ERIC Name: 5901 US HIGHWAY 19, 7Q Address:

City-St-Zip: NEW PORT RICHEY, FL 34652

Title: TD

Name: CHOUNG, MICHAEL 5901 US HWY 19, STE 7Q Address: City-St-Zip: NEW PORT RICHEY, FL 34652

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: SEAN BAUMAN PD 03/10/2011