

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40258

FILED
Jan 21, 2010
Secretary of State

Entity Name: THE PALMS FOUNDATION OF SEBRING, INC.

Current Principal Place of Business:

211 MAGNOLIA AVE
SEBRING, FL 33870 US

New Principal Place of Business:

Current Mailing Address:

211 MAGNOLIA AVE
SEBRING, FL 33870 US

New Mailing Address:

300 CIRCLE PARK DRIVE
SEBRING, FL 33870 US

FEI Number: 59-3032441

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BREED, E. MARK III
325 N. COMMERCE AVE.
SEBRING, FL 33870 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: P
Name: JOHNSON, HARRY C
Address: PO BOX 5
City-St-Zip: LORIDA, FL 33857

Title: TV
Name: FOSTER, SANDY L
Address: 234 SWALLOW AVE
City-St-Zip: SEBRING, FL 33872

Title: TS
Name: SWIHART, RAY
Address: 4313 FLETCHER DR
City-St-Zip: SEBRING, FL 33870

Title: TT
Name: MCLEAN, DOUGLAS A
Address: 300 CIRCLE PARK DRIVE
City-St-Zip: SEBRING, FL 33870

Title: T
Name: DAVIDSON, EMERSON
Address: 342 POINSETTIA AVE. #202
City-St-Zip: SEBRING, FL 33870 US

Title: T
Name: WOLFE, WALTER
Address: 8124 HAMPSHIRE DRIVE
City-St-Zip: SEBRING, FL 33876 US

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: DOUGLAS A MCLEAN

TT

01/21/2010

Electronic Signature of Signing Officer or Director

Date