## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N45025

FILED Apr 13, 2006 Secretary of State

Entity Name: GOLDEN PALMS VILLAS HOMEOWNERS ASSOCIATION, INC.

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

2180 WEST SR 434 SUITE 5000

LONGWOOD, FL 32779 US

Current Mailing Address: New Mailing Address:

2180 WEST SR 434 SUITE 5000

LONGWOOD, FL 32779 US

FEI Number: 59-3135059 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:

HART, JAMES W SENTRY MANAGEMENT INC 2180 W SR 434, SUITE 5000 LONGWOOD, FL 327795044 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:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD
 ( ) Delete
 Title:
 PD
 ( X) Change ( ) Addition

 Name:
 PASILL, RICHARD
 Name:
 SNYDER, DONALD

 Address:
 1972 GOLDEN PALM CIRCLE
 Address:
 1950 GOLDEN PALM CIR

 City-St-Zip:
 TAVARES, FL 32778 US
 TAVARES, FL 32778 US

Title: TD ( ) Delete Title: STD (X) Change ( ) Addition

 Name:
 WEBB, JAMES
 Name:
 REYNOLDS, BRENDA

 Address:
 1956 GOLDEN PALM CIRCLE
 Address:
 1723 TROPICAL CT

 City-St-Zip:
 TAVARES, FL 32778 2RA US
 City-St-Zip:
 TAVARES, FL 32778 US

Title: SD ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 FABRICINO, LISA M
 Name:
 WALTERS, DEE

 Address:
 1956 GOLDEN PALM CIRCLE
 Address:
 1977 GOLDEN PALM CIR

 City-St-Zip:
 TAVARES, FL 32778
 City-St-Zip:
 TAVARES, FL 32778

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DONALD SNYDER PD 04/13/2006