

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45025

FILED
Mar 10, 2008
Secretary of State

Entity Name: GOLDEN PALMS VILLAS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779 US

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779 US

New Mailing Address:

FEI Number: 59-3135059 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

HART, JAMES W JR
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: JAMES W HART JR 03/10/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SNYDER, DONALD
Address: 1950 GOLDEN PALM CIR
City-St-Zip: TAVARES, FL 32778 US

Title: STD () Delete
Name: REYNOLDS, BRENDA
Address: 1723 TROPICAL CT
City-St-Zip: TAVARES, FL 32778 US

Title: VPD () Delete
Name: WALTERS, DEE
Address: 1977 GOLDEN PALM CIR
City-St-Zip: TAVARES, FL 32778

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: REYNOLDS, BRENDA
Address: 1723 TROPICAL CT
City-St-Zip: TAVARES, FL 32778

Title: VPD (X) Change () Addition
Name: WALTERS, DEE
Address: 1977 GOLDEN PALM CIR
City-St-Zip: TAVARES, FL 32778

Title: STD (X) Change () Addition
Name: MCDONALD, DAWN
Address: 1711 TROPICAL CT
City-St-Zip: TAVARES, FL 32778

I hereby certify that the information supplied with this filing does not qualify 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: BRENDA REYNOLDS PD 03/10/2008
Electronic Signature of Signing Officer or Director Date