2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46146

FILED Mar 18, 2010 Secretary of State

Entity Name: PALM ISLAND NORTH PROPERTY OWNER'S ASSOCIATION, INC.

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

7092 PLACIDA RD

CAPE HAZE, FL 33946 US

Current Mailing Address: New Mailing Address:

7092 PLACIDA RD

CAPE HAZE, FL 33946 US

FEI Number: 65-0052684 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:

REMOUR, CRAIG A 7092 PLACIDA RD

CAPE HAZE, FL 33946 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:

Title: F

 Name:
 AUER, ARTHUR DR

 Address:
 667 LANGTON STREET

 City-St-Zip:
 ST LOUIS, MO 63105 US

Title: VP

Name: MATTHEWS, WARREN Address: 6 OAKLAND TERRACE City-St-Zip: DARIEN, CT 06820 US

Title: T

Name: DAVIES, JIM

Address: 64 CHESTNUT STREET
City-St-Zip: MURRAY HILL, NJ 06974 US

Title: D

Name: MADION, CARL Address: 11710 N BLUFF

City-St-Zip: TRAVERSE CITY, MI 49686 US

Title: 5

 Name:
 PHILLIPS, SUSAN

 Address:
 3328 SHORE DRIVE

 City-St-Zip:
 ANNAPOLIS, MD 21403 US

Title: [

Name: CHUDACOFF, BRUCE
Address: 43 CRESTWAY COURT
City-St-Zip: APPLETON, WI 54913 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: CRAIG A. REMOUR MGR 03/18/2010