


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Feb 11, 2005 8:00 am
Secretary of State

02-11-2005 90052 026 ****70.00

DOCUMENT # N92000000065
1. Entity Name
PALMA SOLA VILLAGE HOME OWNERS ASSOC. INC.




Principal Place of Business Mailing Address
6920 4TH AVENUE DRIVE NW BRANDENTON FL 34209 US **P.O. BOX 14381 BRADENTON FL 34280-4381 US**

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

50014275

1st MOORE CR2E037 (10/04)

4. FEI Number **65-0410159** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**RATHVON, JOHN H
6920 4TH AVENUE DRIVE NW
BRADENTON FL 34209**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW - FEE IS \$61.25
Due By May 1, 2005**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	DAVID, AMBAT	
STREET ADDRESS	207 60TH ST NW	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	S	<input type="checkbox"/> Delete
NAME	LENZ, DOROTHY	
STREET ADDRESS	308 70TH ST NW	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	VP	<input type="checkbox"/> Delete
NAME	PAYTON, PH. L	
STREET ADDRESS	111 70TH ST NW	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	T	<input type="checkbox"/> Delete
NAME	RATHVON, JOHN H	
STREET ADDRESS	6920 4TH AVENUE DRIVE NW	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	D	<input type="checkbox"/> Delete
NAME	FIGEL, GEORGE	
STREET ADDRESS	112 69TH ST NW	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	D	<input type="checkbox"/> Delete
NAME	KINNAN, JOE	
STREET ADDRESS	304 69TH ST NW	
CITY-ST-ZIP	BRADENTON FL 34209	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Thomas Clark	
STREET ADDRESS	208 68th St NW	
CITY-ST-ZIP	BRADENTON, FL 34209	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John H. Rathvon John H. Rathvon 2.7.05 941-761-1276
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #