2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2011
Secretary of State

DOCUMENT# N93000003301

Entity Name: PALOMINO ESTATES HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

C/O ALEX WOOD
1431 PALOMINO WAY
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

C/O , BONNIE L ALLEN, TREAS.
1380 PALOMINO WAY
OVIEDO, FL 32765

New Mailing Address:

FEI Number: 59-3193329 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WOOD, ALEX
1431 PALOMINO WAY
OVIEDO, FL 32765 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: PD
Name: REGISTER, DOUG
Address: 1447 PALOMINO WAY
City-St-Zip: OVIEDO, FL 32765

Title: VD
Name: DAVIS, BETH
Address: 1412 PALOMINO WAY
City-St-Zip: OVIEDO, FL 32765

Title: SD
Name: ALLEN, BONNIE L
Address: 1380 PALOMINO WAY
City-St-Zip: OVIEDO, FL 32765

Title: TD
Name: ALLEN, BONNIE L
Address: 1380 PALOMINO WAY
City-St-Zip: OVIEDO, FL 32765

Title: D
Name: DUDA, SANDRA
Address: 1457 PALOMINO WAY
City-St-Zip: OVIEDO, FL 32765

Title: D
Name: BASHORE, ROSEMARIE
Address: 1466 PALOMINO WAY
City-St-Zip: OVIEDO, FL 32765

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: BONNIE L. ALLEN TD 04/20/2011

Electronic Signature of Signing Officer or Director Date