
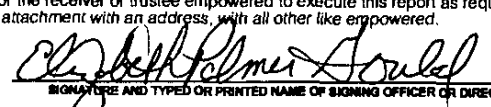


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2007 08:00 AM
Secretary of State

DOCUMENT # N93000004952 1. Entity Name W.H. PALMER OFFICE COMPLEX PROPERTY OWNERS ASSOCIATION, INC.																																																		
Principal Place of Business 1519 DEMPSEY MAYO RD TALLAHASSEE, FL 32308	Mailing Address 4351 MAYLOR ROAD TALLAHASSEE, FL 32308 US																																																	
DO NOT WRITE IN THIS SPACE																																																		
6. Name and Address of Current Registered Agent ADKINS, GWENDOLYN P 1319 THOMASWOOD DR TALLAHASSEE, FL 32312		DO NOT WRITE IN THIS SPACE																																																
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>																																																		
Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																	
10. OFFICERS AND DIRECTORS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td>D</td> </tr> <tr> <td>NAME</td> <td>PALMER, SHARON M</td> </tr> <tr> <td>STREET ADDRESS</td> <td>1519 DEMPSEY MAYO RD</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>TALLAHASSEE, FL 32308</td> </tr> <tr> <td>TITLE</td> <td>D</td> </tr> <tr> <td>NAME</td> <td>PALMER, JUANITA A</td> </tr> <tr> <td>STREET ADDRESS</td> <td>C/O 1519 DEMPSEY MAYO RD</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>TALLAHASSEE, FL 32308</td> </tr> <tr> <td>TITLE</td> <td>D</td> </tr> <tr> <td>NAME</td> <td>PALMER, WALDO H JR</td> </tr> <tr> <td>STREET ADDRESS</td> <td>4364 MAYLER RD</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>TALLAHASSEE, FL 32308</td> </tr> <tr> <td>TITLE</td> <td>D</td> </tr> <tr> <td>NAME</td> <td>GOULD, ELIZABETH P</td> </tr> <tr> <td>STREET ADDRESS</td> <td>4351 MAYLOR RD</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>TALLAHASSEE, FL 32308</td> </tr> <tr> <td>TITLE</td> <td>D</td> </tr> <tr> <td>NAME</td> <td>ADKINS, GWENDOLYN P</td> </tr> <tr> <td>STREET ADDRESS</td> <td>4352 MAYLER ROAD</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>TALLAHASSEE, FL 32308</td> </tr> <tr> <td>TITLE</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> </table>			TITLE	D	NAME	PALMER, SHARON M	STREET ADDRESS	1519 DEMPSEY MAYO RD	CITY-ST-ZIP	TALLAHASSEE, FL 32308	TITLE	D	NAME	PALMER, JUANITA A	STREET ADDRESS	C/O 1519 DEMPSEY MAYO RD	CITY-ST-ZIP	TALLAHASSEE, FL 32308	TITLE	D	NAME	PALMER, WALDO H JR	STREET ADDRESS	4364 MAYLER RD	CITY-ST-ZIP	TALLAHASSEE, FL 32308	TITLE	D	NAME	GOULD, ELIZABETH P	STREET ADDRESS	4351 MAYLOR RD	CITY-ST-ZIP	TALLAHASSEE, FL 32308	TITLE	D	NAME	ADKINS, GWENDOLYN P	STREET ADDRESS	4352 MAYLER ROAD	CITY-ST-ZIP	TALLAHASSEE, FL 32308	TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP	
TITLE	D																																																	
NAME	PALMER, SHARON M																																																	
STREET ADDRESS	1519 DEMPSEY MAYO RD																																																	
CITY-ST-ZIP	TALLAHASSEE, FL 32308																																																	
TITLE	D																																																	
NAME	PALMER, JUANITA A																																																	
STREET ADDRESS	C/O 1519 DEMPSEY MAYO RD																																																	
CITY-ST-ZIP	TALLAHASSEE, FL 32308																																																	
TITLE	D																																																	
NAME	PALMER, WALDO H JR																																																	
STREET ADDRESS	4364 MAYLER RD																																																	
CITY-ST-ZIP	TALLAHASSEE, FL 32308																																																	
TITLE	D																																																	
NAME	GOULD, ELIZABETH P																																																	
STREET ADDRESS	4351 MAYLOR RD																																																	
CITY-ST-ZIP	TALLAHASSEE, FL 32308																																																	
TITLE	D																																																	
NAME	ADKINS, GWENDOLYN P																																																	
STREET ADDRESS	4352 MAYLER ROAD																																																	
CITY-ST-ZIP	TALLAHASSEE, FL 32308																																																	
TITLE																																																		
NAME																																																		
STREET ADDRESS																																																		
CITY-ST-ZIP																																																		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  3/9/07 8509336697 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																		



01052007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-3321552	Applied For <input type="checkbox"/> Not Applicable
------------------------------------	--

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

U000000664077
03/22/07-80030-008 61.25

DO NOT WRITE
IN THIS SPACE