

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004952

FILED  
Jan 12, 2009  
Secretary of State

**Entity Name:** W.H. PALMER OFFICE COMPLEX PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1519 DEMPSEY MAYO RD  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

**Current Mailing Address:**

4351 MAYLOR ROAD  
TALLAHASSEE, FL 32308 US

**New Mailing Address:**

**FEI Number:** 59-3321552      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ADKINS, GWENDOLYN P  
1319 THOMASWOOD DR  
TALLAHASSEE, FL 32312 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: D ( ) Delete  
Name: PALMER, SHARON M  
Address: 1519 DEMPSEY MAYO RD  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D ( ) Delete  
Name: PALMER, JUANITA A  
Address: C/O 1519 DEMPSEY MAYO RD  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D ( ) Delete  
Name: PALMER, WALDO H JR  
Address: 4364 MAYLER RD  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D ( ) Delete  
Name: GOULD, ELIZABETH P  
Address: 4351 MAYLOR RD  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D ( ) Delete  
Name: ADKINS, GWENDOLYN P  
Address: 4352 MAYLOR ROAD  
City-St-Zip: TALLAHASSEE, FL 32308

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: PALMER, WALDO H JR  
Address: 4364 MAYLOR RD  
City-St-Zip: TALLAHASSEE, FL 32308

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: ADKINS, GWENDOLYN P  
Address: 4352 MAYLOR ROAD  
City-St-Zip: TALLAHASSEE, FL 32308

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: ELIZABETH PALMER GOULD

TREA

01/12/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date