

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005801

FILED
Apr 27, 2005
Secretary of State

Entity Name: NORMANDY ISLES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2328 S CONGRESS AVENUE
SUITE C
WEST PALM BEACH, FL 33406 US

New Principal Place of Business:

Current Mailing Address:

2328 S CONGRESS AVENUE
SUITE C
WEST PALM BEACH, FL 33406 US

New Mailing Address:

FEI Number: 65-0497667

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HILLEY, V. DONALD
860 US HIGHWAY ONE
SUITE 108
NORTH PALM BEACH, FL 33408 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: SD () Delete
Name: BRADSHAW, KERRY
Address: 1301 CAPE MAY LANE
City-St-Zip: WEST PALM BEACH, FL 33413

Title: TD () Delete
Name: HUGHES, LINDA G
Address: 1175 HATTERAS CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33413

Title: PD () Delete
Name: SMITH, CLYDE J
Address: 1200 HATTERAS CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33413

Title: VD () Delete
Name: MALOOLEY, MICHELE
Address: 1066 SALMON ISLE
City-St-Zip: WEST PALM BEACH, FL 33413

Title: D () Delete
Name: KLEMMANN, SUE
Address: 1145 HAITERAS CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33413

Title: D () Delete
Name: HARTUNG, TIM
Address: 1127 PENINSULA WAY
City-St-Zip: WEST PALM BEACH, FL 33413

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CLYDE SMITH

PD

04/27/2005

Electronic Signature of Signing Officer or Director

Date