

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002545

FILED
Mar 19, 2010
Secretary of State

Entity Name: PALM LAKES AT FOXMOOR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

GULF SHORES C A M
76 PONDELLA RD STE 201
N. FT. MYERS, FL 33903 US

New Principal Place of Business:

GULF SHORES CAM INC.
76 PONDELLA RD STE 201
N. FT. MYERS, FL 33903 US

Current Mailing Address:

GULF SHORES C A M
76 PONDELLA RD STE 201
N. FT. MYERS, FL 33903 US

New Mailing Address:

GULF SHORES CAM INC.
76 PONDELLA RD STE 201
N. FT. MYERS, FL 33903 US

FEI Number: 65-0570515

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DICK LAPOSTA CMCA
GULF SHORES CAM
76 PONDELLA RD STE 201
N. FT. MYERS, FL 33903 US

Name and Address of New Registered Agent:

LAPOSTA, RICHARD L
GULF SHORES CAM INC
76 PONDELLA RD STE 201
N. FT. MYERS, FL 33903 US

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: RICHARD L. LAPOSTA

03/19/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DS
Name: PROULX, ANDRE
Address: 15620-102 CRYSTAL LAKE DR
City-St-Zip: N. FT. MYERS, FL 33917

Title: D
Name: REYNOLDS, DAVID
Address: 15610-103 CRYSTAL LAKE DR.
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: DT
Name: COMPTON, LEONARD
Address: 15610-102 CRYSTAL LAKE DR
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: DP
Name: ADRIANCE, LEONARD
Address: 15620-103 CRYSTAL LAKE DR #102
City-St-Zip: N FT MYERS, FL 33917

Title: DVP
Name: WARD, SHARON
Address: 5821-104 CRYSTAL LAKE LANE
City-St-Zip: N. FORT MYERS, FL 33917

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: LEONARD ADRIANCE

DP

03/19/2010

Electronic Signature of Signing Officer or Director

Date