

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005558

FILED  
Mar 02, 2009  
Secretary of State

**Entity Name:** PALM TREE HARBOR HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

PO BOX 182  
ST. JAMES CITY, FL 33956

**New Principal Place of Business:**

3531 SEA HOLLY LANE  
ST. JAMES CITY, FL 33956

**Current Mailing Address:**

PO BOX 182  
ST. JAMES CITY, FL 33956

**New Mailing Address:**

**FEI Number:** 65-0641700

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ESLINGER, RAY  
3521 SEA HOLLY LANE  
ST. JAMES CITY, FL 33956 US

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

ESLINGER, RAY  
3531 SEA HOLLY LANE  
ST. JAMES CITY, FL 33956 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:

03/02/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ESLINGER, SUE  
Address: 3531 SEA HOLLY LANE  
City-St-Zip: ST. JAMES CITY, FL 33956

Title: VD ( ) Delete  
Name: HOWINGTON, F. LEE  
Address: 1287 CLEBURNE DR  
City-St-Zip: FORT MYERS, FL 33919

Title: TSD ( ) Delete  
Name: ESLINGER, RAY  
Address: 3531 SEA HOLLY LANE  
City-St-Zip: ST. JAMES CITY, FL 33956

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

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

Title: VD (X) Change ( ) Addition  
Name: WALSH, CYNTHIA  
Address: 3491 SEA HOLLY LANE  
City-St-Zip: ST. JAMES CITY, FL 33956

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

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: RAY ESLINGER

TSD

03/02/2009

Electronic Signature of Signing Officer or Director

Date