2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9600000073

FILED Mar 31, 2009 Secretary of State

Entity Name: PALM-AIRE RESORT OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2601 PALM-AIRE DR N

POMPANO BEACH, FL 33069 US

Current Mailing Address: New Mailing Address:

2601 PALM-AIRE DR N

POMPANO BCH, FL 33069 US

FEI Number: 65-0662716 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

CORPORATION SERVICE COMPANY 1201 HAYS STREET

TALLAHASSEE, FL 323012525 US

DICKSON, DUANE A 2601 PALM AIRE DRIVE N. POMPANO BEACH, FL 33069 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: DUANE A. DICKSON 03/31/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition

 Name:
 DUNSTAN, RICK
 Name:

 Address:
 2601 PALM AIRE DR. N
 Address:

 City-St-Zip:
 POMPANO BEACH, FL 33069
 City-St-Zip:

Title: VP () Delete Title: VP (X) Change () Addition Name: LARRIEN, JORGE Name: LARRIEU, JORGE

Address: 2601 PACMAIRE DR. N.
City-St-Zip: POMPANO BEACH, FL 33069

Address: 2601 PALM AIRE DR. N.
City-St-Zip: POMPANO BEACH, FL 33069

Title: STD () Delete Title: STD (X) Change () Addition

 Name:
 MUSSELMAN, JEFF
 Name:
 MUSSELMAN, JEFF

 Address:
 8427 SOUT PARR CIRCLE
 Address:
 8427 SOUTH PARK CIRCLE

 City-St-Zip:
 ORLANDO, FL 32819
 City-St-Zip:
 ORLANDO, FL 32819

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: RICK DUNSTAN PRES 03/31/2009