

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 30, 2005
Secretary of State**

DOCUMENT# N97000000121

Entity Name: PALM ISLES PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5273 PALM ISLES BLVD
SARASOTA, FL 34233

New Principal Place of Business:

Current Mailing Address:

5273 PALM ISLES BLVD
SARASOTA, FL 34233

New Mailing Address:

5266 PALM ISLES BLVD
SARASOTA, FL 34233

FEI Number: 59-3544991

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONATHON, LASSA F
5266 PALM ISLES BLVD.
SARASOTA, FL 34233 US

Name and Address of New Registered Agent:

LASSA, JONATHON F
5266 PALM ISLES BLVD.
SARASOTA, FL 34233 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: JONATHON LASSA

04/30/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: D'ATRIA, JOHN
Address: 5273 PALM ISLES BLVD
City-St-Zip: SARASOTA, FL 34233

Title: DT () Delete
Name: WOLF, JOHN C
Address: 5272 PALM ISLES BLVD
City-St-Zip: SARASOTA, FL 34233

Title: SD () Delete
Name: LASSA, JONATHON F
Address: 5266 PALM ISLES BLVD.
City-St-Zip: SARASOTA, FL 34233

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:

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: JONATHON LASSA

SD

04/30/2005

Electronic Signature of Signing Officer or Director

Date