## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000000121

FILED Jan 31, 2006 Secretary of State

Entity Name: PALM ISLES PROPERTY OWNERS ASSOCIATION, INC. **New Principal Place of Business: Current Principal Place of Business:** 5273 PALM ISLES BLVD SARASOTA, FL 34233 **Current Mailing Address: 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: 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete D'ATRIA, JOHN Name: Name: Address: 5273 PALM ISLES BLVD Address: City-St-Zip: SARASOTA, FL 34233 City-St-Zip: Title: () Delete Title: () Change () Addition Name: WOLF, JOHN C Name: Address: 5272 PALM ISLES BLVD Address: City-St-Zip: SARASOTA, FL 34233 City-St-Zip: Title: () Delete Title: () Change () Addition LASSA, JONATHON F Name: Name: 5266 PALM ISLES BLVD. Address: Address: City-St-Zip: SARASOTA, FL 34233 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JONATHON LASSA SD 01/31/2006