2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000766

FILED Jan 27, 2010 Secretary of State

Entity Name: PALM ISLES HOMEOWNERS ASSOCIATION, INC.

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

11681 ISLE OF PALMS DR 11620 ISLE OF PALMS DR

FORT MYERS BEACH, FL 33931 FORT MYERS BEACH, FL 33931

Current Mailing Address: New Mailing Address:

11681 ISLE OF PALMS DR 11620 ISLE OF PALMS DR

FORT MYERS BEACH, FL 33931 FORT MYERS BEACH, FL 33931

FEI Number: 65-0727630 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:

ORT, KAREN SHARP, WILLIAM

11681 ISLE OF PALMS DR 11620 ISLE OF PALMS DR

FORT MYERS BEACH, FL 33931 US FORT MYERS BEACH, FL 33931 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: WILLIAM SHARP 01/27/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PRES

 Name:
 SHARP, WILLIAM

 Address:
 11620 ISLE OF PALM DR

 City-St-Zip:
 FORT MYERS BEACH, FL 33931

Title: VP

Name: DOMINGUEZ, PAUL
Address: 11521 ISLE OF PALMS DR
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: SECR

 Name:
 DOMINGUEZ, PAUL

 Address:
 11521 ISLE OF PALMS DR

 City-St-Zip:
 FORT MYERS BEACH, FL 33931

Title: TRES

Name: WEBER, CHRIS
Address: 17951 PALM CIRCLE

City-St-Zip: FORT MYERS BEACH, FL 33931

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: WILLIAM SHARP PRES 01/27/2010