

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 02, 2011
Secretary of State

DOCUMENT# N97000000766

Entity Name: PALM ISLES HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**11620 ISLE OF PALMS DR
FORT MYERS BEACH, FL 33931**New Principal Place of Business:****Current Mailing Address:**11620 ISLE OF PALMS DR
FORT MYERS BEACH, FL 33931**New Mailing Address:****FEI Number:** 65-0727630**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SHARP, WILLIAM
11620 ISLE OF PALMS DR
FORT MYERS BEACH, FL 33931 US**Name and Address of New Registered Agent:**

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:

Title: PRES
Name: BROWER, DAVID
Address: 11550 ISLE OF PALMS DR
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: VP
Name: SHARP, WILLIAM
Address: 11620 ISLE OF PALMS DR
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: SECR
Name: SHARP, WILLIAM
Address: 11620 ISLE OF PALMS DR
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: TRES
Name: MININNI, ROBERT
Address: 17931 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: DAVID BROWER

PRES

06/02/2011

Electronic Signature of Signing Officer or Director

Date