

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006490

FILED
Mar 23, 2004
Secretary of State**Entity Name:** THE PALMS NEIGHBORHOOD ASSOCIATION OF THE PALMS AT HAMPTON LAKES, INC.**Current Principal Place of Business:**1416 CONCORD ST E
ORLANDO, FL 32803 US**New Principal Place of Business:**1600 W. COLONIAL DR.
ORLANDO, FL 32804 US**Current Mailing Address:**P O BOX 531010
ORLANDO, FL 328531010 US**New Mailing Address:****FEI Number:** 59-3553683**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**THE MELROSE CORP
1416 CONCORD ST EAST
ORLANDO, FL 32803 US**Name and Address of New Registered Agent:**MELROSE MANAGEMENT GROUP
1600 W. COLONIAL DR.
ORLANDO, FL 32804 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: JACK B. HANSON

03/23/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KAISER, DAN
Address: 385 DOUGLAS AVE., STE 2000
City-St-Zip: ALTAMONTE SPGS, FL 32714 US

Title: D () Delete
Name: MAKRANSKY, JAMES
Address: 385 DOUGLAS AVE., STE 2000
City-St-Zip: ALTAMONTE SPGS, FL 32714 US

Title: D () Delete
Name: STAPLETON, KIRSTIN
Address: 385 DOUGLAS AVE., STE 2000
City-St-Zip: ALTAMONTE SPGS, FL 32714 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP (X) Change () Addition
Name: SHEELER, LAWRENCE M
Address: 385 DOUGLAS AVE., STE 2000
City-St-Zip: ALTAMONTE SPGS, FL 32714 US

Title: DP (X) Change () Addition
Name: MAKRANSKY, JAMES
Address: 385 DOUGLAS AVE., STE 2000
City-St-Zip: ALTAMONTE SPGS, FL 32714 US

Title: DST (X) Change () Addition
Name: KENNEY, SHAWN
Address: 385 DOUGLAS AVE., STE 2000
City-St-Zip: ALTAMONTE SPGS, FL 32714 US

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: LARRY SHEELER

D

03/23/2004

Electronic Signature of Signing Officer or Director

Date