2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005924

FILED Apr 28, 2009 Secretary of State

Entity Name: THE PALMS COUNTRY CLUB AND RESORT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 7900 MYSTIC DUNES LANE CELEBRATION, FL 34747 US **Current Mailing Address: New Mailing Address:** 7380 SAND LAKE ROAD SUITE 600 ORLANDO, FL 32819 US FEI Number: 59-3543294 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: A.G.C. CO CORPORATION SERVICE COMPANY 200 SOUTH ORANGE AVENUE 1201 HAYS STREET TALLAHASSEE, FL 32301 **SUITE 2300** US ORLANDO, FL 32801 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: DOREEN WALLACE 04/28/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition JANKOWSKY, PETER Name: Name: 7380 SAND LAKE RD., SUITE 600 Address: Address: City-St-Zip: ORLANDO, FL 32819 US City-St-Zip: Title: () Delete Title: () Change () Addition HAMILTON, LONNIE Name: Name: Address: 7380 SAND LAKE RD., SUITE 600 Address: City-St-Zip: ORLANDO, FL 32819 US City-St-Zip: Title: () Delete Title: () Change () Addition MARCUS, ANDREW Name: Name: 7380 SAND LAKE RD STE 600 Address: Address: City-St-Zip: ORLANDO, FL 32819 US City-St-Zip: Title: TD () Delete Title: () Change () Addition Name: WILLIS, DAVID Name: 7380 SAND LAKE RD., STE. 600 Address: Address: City-St-Zip: ORLANDO, FL 32819 US City-St-Zip: Title: VPD () Delete Title: () Change () Addition HORACE, DONALD Name: Name: 7380 SAND LAKE RD., SUITE 600 Address: Address: City-St-Zip: ORLANDO, FL 32819 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ANDREW MARCUS, SECRETARY SECY 04/28/2009