2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2009
Secretary of State

DOCUMENT# N98000006665

Entity Name: PALATLAKAHA ENVIRONMENTAL AND AGRICULTURAL RESERVE ASSOCIATION, INC.

Current Principal Place of Business:

5336 UNIVERSITY AVENUE
LEESBURG, FL US

New Principal Place of Business:

5336 UNIVERSITY AVENUE
LEESBURG, FL 34748 US

Current Mailing Address:

P.O BOX 424
OKAHUMPKA, FL 327620424 US

New Mailing Address:

FEI Number: 59-3745584 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SALZMAN, GARY S
26019 GLEN EAGLE DR.
LEESBURG, FL 34748 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:	P	( ) Delete
Name:	SALZMAN, GARY	
Address:	26019 GLEN EAGLE DR.	
City-St-Zip:	LEESBURG, FL 34748	
Title:	V	( ) Delete
Name:	MOELLER, PETER	
Address:	3736 PLANTATION BLVD	
City-St-Zip:	LEESBURG, FL 34748	
Title:	D	( ) Delete
Name:	WOLF, GEORGE	
Address:	167 JACARANDA DR.	
City-St-Zip:	LEESBURG, FL 34748	
Title:	D	( ) Delete
Name:	BOULEY, EUGENE	
Address:	25228 WATERBRIDGE CT.	
City-St-Zip:	LEESBURG, FL 34748	
Title:	D	( ) Delete
Name:	REMER, MARY	
Address:	421 HAWTHORNE BLVD	
City-St-Zip:	LEESBURG, FL 34748	
Title:	D	( ) Delete
Name:	BALLARD, LINDA	
Address:	25348 CRESTWATER DRIVE	
City-St-Zip:	LEESBURG, FL 34748	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
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: GARY S SALZMAN PRES 02/06/2009
Electronic Signature of Signing Officer or Director — Date