

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35381

FILED
May 09, 2005
Secretary of State

Entity Name: PALAMAR OAKS VILLAGE III HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1221 HANCOCK CIR
ST. CLOUD, FL 34769 US

New Principal Place of Business:

Current Mailing Address:

1221 HANCOCK CIR
ST. CLOUD, FL 34769 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BOESSEL, DON
1221 HANCOCK CIR
ST. CLOUD, FL 34769 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: PD () Delete
Name: BOESSEL, DON
Address: 1221 HANCOCK CIR
City-St-Zip: ST. CLOUD, FL

Title: T () Delete
Name: HARVELL, TERRY
Address: 1214 HANCOCK CIRCLE
City-St-Zip: SAINT CLOUD, FL 34769

Title: D () Delete
Name: KNIGHT, TERRY
Address: 1245 HANCOCK CIRCLE
City-St-Zip: ST. CLOUD, FL 34744

Title: D () Delete
Name: SWEET, JOEL
Address: 1225 HANCOCK CIRCLE
City-St-Zip: SAINT CLOUD, FL 34769

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: SWAINE, RICHARD
Address: 1237
City-St-Zip: SAINT CLOUD, FL 34769

Title: D (X) Change () Addition
Name: SPARKS, GARY
Address: 1269
City-St-Zip: ST. CLOUD, FL 34744

Title: D (X) Change () Addition
Name: BRAZEE, DON
Address: 1217 HANCOCK CIRLE
City-St-Zip: SAINT CLOUD, FL 34769

Title: D () Change (X) Addition
Name: ARDEN, CYNTHIA
Address: 1254 HANCOCK CIRCLE
City-St-Zip: SAINT CLOUD, FL 34769

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: DON BOESSEL

D

05/09/2005

Electronic Signature of Signing Officer or Director

Date