

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32754

Entity Name: PALM VILLAGE RANCH HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**1200 SW 44TH BLVD
OKEECHOBEE, FL 34974**Current Mailing Address:**1200 SW 44TH BLVD
OKEECHOBEE, FL 34974**FEI Number:** 65-0172595**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**LANDIS, SANDRA K PRES
1200 SW 44TH BLVD
OKEECHOBEE, FL 34974 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:** SANDRA K LANDIS

02/10/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT/DIRECTOR
Name LANDIS, SANDRA K PRES
Address 1200 SW 44TH BLVD
City-State-Zip: OKEECHOBEE FL 34974

Title VICE PRESIDENT/DIRECTOR
Name BELL, WALTER
Address 1200 SW 44TH BLVD
City-State-Zip: OKEECHOBEE FL 34974

Title TREASURER/DIRECTOR
Name SOLLOWAY, SUSAN
Address 1200 SW 44TH BLVD
City-State-Zip: OKEECHOBEE FL 34974

Title DIRECTOR
Name FRITZ, CARL DIR
Address 1200 SW 44TH BLVD
City-State-Zip: OKEECHOBEE FL 34974

Title SECRETARY/DIRECTOR
Name WILKINS, BARBARA A SEC
Address 1200 SW 44TH BLVD
City-State-Zip: OKEECHOBEE FL 34974

Title DIRECTOR
Name BERGLUND, DAVE
Address 1200 SW 44TH BLVD
City-State-Zip: OKEECHOBEE FL 34974

Title DIRECTOR
Name STERLING, FRED
Address 1200 SW 44TH BLVD
City-State-Zip: OKEECHOBEE FL 34974

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: BARBARA A. WILKINS**SECRETARY**

02/10/2014

Electronic Signature of Signing Officer/Director Detail

Date