2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400000168

Entity Name: PALM ISLE NEIGHBORHOOD HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

ALLIANT PROPERTY MANAGEMENT, LLC 13831 VECTOR AVENUE FORT MYERS, FL 33907

Current Mailing Address:

C/O ALLIANT PROPERTY MANAGEMENT, LLC 13831 VECTOR AVENUE FORT MYERS, FL 33907 US

FEI Number: 65-0508306

Name and Address of Current Registered Agent:

STROHM, JOHN C/O ALLIANT PROPERTY MANAGEMENT, LLC 13831 VECTOR AVENUE FORT MYERS, FL 33907 US Certificate of Status Desired: No

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.

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SIGNATURE	E: JOHN STROHM			03/18/2021
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PD	Title	VP	
Name	ANTKOW, TED	Name	DOLLEY, OISIN	
Address	C/O ALLIANT PROPERTY MANAGEMENT, LLC 13831 VECTOR AVENUE	Address	C/O ALLIANT PROPERTY MANAGEMENT, LLC 13831 VECTOR AVENUE	
City-State-Zip:	FORT MYERS FL 33907	City-State-Zip:	FORT MYERS FL 33907	
Title	TD	Title	SECRETARY	
Name	LOGAN, AL	Name	SHRAIAR, ROSALYN	
Address	C/O ALLIANT PROPERTY MANAGEMENT, LLC 13831 VECTOR AVENUE	Address	C/O ALLIANT PROPERTY MANAGEMENT, LLC 13831 VECTOR AVENUE	
City-State-Zip:	FORT MYERS FL 33907	City-State-Zip:	FORT MYERS FL 33907	
Title	DIRECTOR			
Name	WESTON, MICHAEL			
Address	C/O ALLIANT PROPERTY MANAGEMENT, LLC 13831 VECTOR AVENUE			
City-State-Zip:	FORT MYERS FL 33907			

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: TED ANTKOW

PRESIDENT

Electronic Signature of Signing Officer/Director Detail