

**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K54946

**FILED  
May 02, 2005  
Secretary of State**

**Entity Name:** PALM CITY TRANSMISSIONS, INC.

**Current Principal Place of Business:**

3393 SW 42ND AVE  
PALM CITY, FL 34990 US

**New Principal Place of Business:**

**Current Mailing Address:**

% PETER T. GIANINO  
217 EAST OCEAN BLVD, PO DRAWER 2846  
STUART, FL 34995

**New Mailing Address:**

**FEI Number:** 65-0096154      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GIANINO, PETER T.  
217 EAST OCEAN BLVD  
POST OFFICE DRAWER 2846  
STUART, FL 34995 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: RIEGELSBERGER, JOHN, S.  
Address: 3371 S.W. 42ND AVE.  
City-St-Zip: PALM CITY, FL

Title: S ( ) Delete  
Name: GIANINO, PETER T ESQ  
Address: 3395 SW 42ND AVE  
City-St-Zip: PALM CITY, FL

Title: VP ( ) Delete  
Name: GIANINO, PETER T ESQ  
Address: 3395 42ND AVE.  
City-St-Zip: PALM CITY, FL

**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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER T. GIANINO

VP

05/02/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date