2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K54946

3395 42ND AVE.

PALM CITY, FL

Address: City-St-Zip:

Entity Name: PALM CITY TRANSMISSIONS INC

FILED Apr 10, 2009 Secretary of State

	TALIN ON	T TTO A VOIVING GIVEN, II VO.			
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
3393 SW 4 PALM CITY	2RD AVE Y, FL 34990	US	3393 SW 42ND AVE PALM CITY, FL 34990	US	
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
		, PO DRAWER 2846 US	3393 SW 42ND AVE 217 EAST OCEAN BLVD PALM CITY, FL 34990	, PO DRAWER 2846 US	
FEI Number:	65-0096154	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of N	Name and Address of New Registered Agent:	
3393 SW 4 PALM CITY	f, FL 34990 named entity s of Florida.	US	RIEGELS BERGER, JOH 3393 SW 42ND AVE PALM CITY, FL 34990 ourpose of changing its registered o	US	
SIGNATOR		ic Signature of Registered Age	ent	Date	
Election Can		g Trust Fund Contribution ().		Bute	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP () RIEGELSBERG 3371 S.W. 42N PALM CITY, FL	D AVE.	Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	S () GIANINO, PETE 3395 SW 42ND PALM CITY, FL	AVE	Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name:	VP () GIANINO, PETE	Delete R T ESQ	Title: () Name:	Change () Addition	

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

Address:

City-St-Zip:

SIGNATURE: JOSEPH PRESSENDO CPA 04/10/2009