## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N47865

Entity Name: PALMTRAIL, INC.

FILED Apr 29, 2004 Secretary of State

Littly Nan	HE. PALIVITA	AIL, INC.			
Current Pi	rincipal Place	of Business:	New Prince	New Principal Place of Business:	
344 PALM DELRAY B	TRAIL BEACH, FL 33	483			
Current Mailing Address:			New Maili	New Mailing Address:	
344 PALM DELRAY B	TRAIL BEACH, FL 33	483			
FEI Number: 65-0324017 FEI Number Applied For ( )			FEI Number Not Applicable ( ) Certificate of Status Desired ( )		
Name and	Address of C	Current Registered Agent:	Name and	Address of New Registered Agent:	
LAURA GC 325 WINTE W PALM B		5 US			
The above in the State		submits this statement for the p	ourpose of changing i	ts registered office or registered agent, or both,	
SIGNATUR	RE:				
	Electror	nic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ( ) SEGARRA, HO 344 PALM TRA DELRAY BCH,	IL	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	TD ( ) MCINTOSH, JC 344 PALM TRA DELRAY BEAC	IL	Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition BECK, MARGARET 1170 SOUTH DRIVE CIRCLE DELRAY BEACH, FL 33445	
Title: Name: Address: City-St-Zip:	T ( ) COLE, BERNAI 344 PALM TRA DELRAY BEAC	IL	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S ( ) MCINTOSH, JC 344 PALM TRA DELRAY BEAC	IL	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	( )	) Delete	Title: Name: Address: City-St-Zip:	D ( ) Change (X) Addition TAYLOR, JACQUELINE 243 LEXINGTON AVE NEW YORK, NY 10016	

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: JOAN MCINTOSH S 04/29/2004