


2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 19, 2008 08:00 A
Secretary of State

DOCUMENT # P04000044160	
1. Entity Name THE PALMETTO CANYON COMPANY	

Principal Place of Business 6625 CORMORANT CT SOUTH PASADENA FL 33707 US	Mailing Address 6625 CORMORANT CT SOUTH PASADENA FL 33707 US
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State

1st MOORE CR2E034 (10/07)

4. FEI Number 90-0152150	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent MCCARTHY, VAUGHN 6625 CORMORANT CT SOUTH PASADENA FL 33707	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when transferring) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P	<input type="checkbox"/> Delete MCCARTHY, VAUGHN E	TITLE U00000863851	<input type="checkbox"/> Change <input type="checkbox"/> Addition 04/03/08-80108-014 150.00
NAME MCCARTHY, VAUGHN E	STREET ADDRESS 6625 CORMORANT CT	CITY-ST-ZIP SOUTH PASADENA FL 33707	
TITLE VP	<input type="checkbox"/> Delete MCCARTHY, ELISE C	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME MCCARTHY, ELISE C	STREET ADDRESS 6625 CORMORANT CT	CITY-ST-ZIP SOUTH PASADENA FL 33707	
TITLE S	<input type="checkbox"/> Delete MCCARTHY, KYLE R	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME MCCARTHY, KYLE R	STREET ADDRESS 6625 CORMORANT CT	CITY-ST-ZIP SOUTH PASADENA FL 33707	
TITLE <input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	NAME	NAME	
STREET ADDRESS	STREET ADDRESS	STREET ADDRESS	
CITY-ST-ZIP	CITY-ST-ZIP	CITY-ST-ZIP	
TITLE <input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	NAME	NAME	
STREET ADDRESS	STREET ADDRESS	STREET ADDRESS	
CITY-ST-ZIP	CITY-ST-ZIP	CITY-ST-ZIP	
TITLE <input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	NAME	NAME	
STREET ADDRESS	STREET ADDRESS	STREET ADDRESS	
CITY-ST-ZIP	CITY-ST-ZIP	CITY-ST-ZIP	

12. I hereby certify that the information supplied in this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the recipient of the report; and that my name appears in Block 10 or Block 11 if changed, or on an attachment to this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment to this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment to this report as required by Chapter 607, Florida Statutes.

SIGNATURE:  **VAUGHN MCCARTHY** 3.17.08 727.347.6625
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Days to Prepare