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FILED
Mar 25 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000086289 (2)

1. Corporation Name

THE PEACH AND THE PALM, INC.

Principal Place of Business

~~1615 LAIRD ST.~~
KEY WEST FL 33040

Mailing Address

~~1615 LAIRD ST.~~
KEY WEST FL 33040

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/08/1995

4. FEI Number

65-0651221

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 906 GRINNELL

Suite, Apt. #, etc.

22

City & State

23 KEY WEST FL

Zip

24 33040

Country

25 MONROE

2a. Mailing Address

26 906 GRINNELL

Suite, Apt. #, etc.

27

City & State

28 KEY WEST FL

Zip

29 33040

Country

30 MONROE

9. Name and Address of Current Registered Agent

EMMONS, ROGER G
~~1615 LAIRD ST.~~
KEY WEST FL 33040

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

906 GRINNELL

83

84 City

KEY WEST

FL

85 Zip Code

33040

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Roger G. Emons*

Signature, typed or printed name of registered agent and title if applicable

ROGER EMMONS, PRESIDENT

(NOTE: Registered Agent signature required when reinstating)

DATE

2/11/98

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME P
STREET ADDRESS EMMONS, ROGER G
~~1615 LAIRD ST.~~
CITY-ST-ZIP KEY WEST FL 33040

TITLE ☐ DELETE

NAME V
STREET ADDRESS EDWARDS, KENNETH L
~~1615 LAIRD ST.~~
CITY-ST-ZIP KEY WEST FL 33040

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME 906 GRINNELL
1.3 STREET ADDRESS KEY WEST, FL 33040
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME 906 GRINNELL
2.3 STREET ADDRESS KEY WEST, FL 33040
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *Roger G. Emons*

ROGER EMMONS

PRESIDENT 2/11/98

CR2E034 (10/97)