# 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# N47865

Entity Name: PALMTRAIL, INC.

## **Current Principal Place of Business:**

344 PALM TRAIL DELRAY BEACH, FL 33483

### **Current Mailing Address:**

344 PALM TRAIL DELRAY BEACH, FL 33483 US

# FEI Number: 65-0324017

## Name and Address of Current Registered Agent:

KITE, ROSEMARY TREAS. 344 PALM TRAIL DELRAY BEACH, FL 33483 US

Date

Certificate of Status Desired: No

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

## **Officer/Director Detail :**

| Title           | PD                    | Title           | VP                    |
|-----------------|-----------------------|-----------------|-----------------------|
| Name            | SEGARRA, HORTENSIA    | Name            | BIDDESWORTH, DIANE B  |
| Address         | 7100 SW 75TH AVE      | Address         | 7100 SW 75TH AVENUE   |
| City-State-Zip: | MIAMI FL 33143        | City-State-Zip: | MIAMI FL 33143        |
| Title           | т                     | Title           | AS                    |
| Name            | KITE, ROSEMARY        | Name            | DONOSO, MARIA BEATRIZ |
| Address         | 344 PALM TRAIL        | Address         | 344 PALM TRAIL        |
| City-State-Zip: | DELRAY BEACH FL 33483 | City-State-Zip: | DELRAY BEACH FL 33483 |
| Title           | S                     |                 |                       |
| Name            | TAYLOR, JACQUELINE    |                 |                       |
| Address         | 243 LEXINGTON AVE     |                 |                       |
| City-State-Zip: | NEW YORK NY 10016     |                 |                       |

I hereby 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 all other like empowered.

SIGNATURE: ROSEMARY KITE

TREASURER

02/24/2015

Electronic Signature of Signing Officer/Director Detail

Date