

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 PM 2:36

DOCUMENT # 327072 (5)

1. Corporation Name:

PALMER LAND INVESTMENT COMPANY INC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business:

**4416 BAY BREEZE RD
P.O. BOX 565343
ORLANDO FL 32858**

Mailing Address:

**4416 BAY BREEZE RD
P.O. BOX 565343
ORLANDO FL 32858**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or qualified

03/01/1968

3a. Date of last report

05/11/1994

2. Previous Fiscal Year Ending:

21

2a. Mailing Address:

26

4. FET Number

59-1234006

Applied For

First Application

State App # 1st

22

State App # 1st

27

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

City & State

23

City & State

28

6. Director Campaign Financing

☐

\$5.00 May Be

Added to Fees

8. This corporation has equity for redemption for order by 1991/92.

Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PALMER, RICHARD L
4416 BAYBREEZE RD
ORLANDO, FLORIDA
32808**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.01(1)(b) and 607.01(2)(b), Florida Statutes, this 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 the said 607.01(1)(b), Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

12a	SD
NAME	PALMER, FRANCES H
STREET ADDRESS	4416 BAYBREEZE RD
CITY, ST, ZIP	ORLANDO, FL 00000
12b	PTD
NAME	PALMER, RICHARD L
STREET ADDRESS	4416 BAYBREEZE RD
CITY, ST, ZIP	ORLANDO, FL 00000
12c	VD
NAME	CROOK, JOHN H
STREET ADDRESS	4416 BAYBREEZE RD
CITY, ST, ZIP	ORLANDO, FL 00000
12d	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
12e	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
12f	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13a	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
13b	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
13c	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
13d	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
13e	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 119.02(1)(b), Florida Statutes. I further certify that the information indicated on the 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 liquidator thereof and to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13. If changed, names are attached with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard L. Palmer, Pres

5/1/95

407-299-6436