

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **334220** (1)

1. Corporation Name

PALERS DEVELOPMENT CORP

Principal Place of Business

**5070 N HIGHWAY A1A
VERO BEACH FL 32963
US**

Mailing Address

**5070 N. HIGHWAY A1A
VERO BEACH FL 32963
US**



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

**BLUM, PETER
1890 S OCEAN DR
MANALAPAN FL 33462**

81 Name

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

83

84 City

FL 85 Zip Code

3. Date Incorporated or Qualified

08/26/1968

3a. Date of Last Report

03/20/1995

4. FEI Number

59-1269058

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title of applicant

(NOTE: Registered Agent signature required when applicable)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

**PD
BLUM, PETER
1890 S OCEAN DR
MANALAPAN FL**

☐ DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

**SD
BLUM, MAUREEN
1890 S OCEAN DR
MANALAPAN FL**

☐ DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

**V
HARRIS, WILLIAM R.
2483 PAR CIRCLE
DELRAY BEACH FL**

☐ DELETE

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SIGNATURE:

Peter Blum
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/96

DATE

407-234-4846

CHARTERED FIDELITY

CR2E034 (12/95)