## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # 411918 1. Entity Name PALMER POOLS CORPORATION

Mar 18, 2004 08:00 AM Secretary of State

**FILED** 

Principal Place of Business

303 BURLEIGH COURT WINTER SPRINGS, FL 32708-4367 Mailing Address

303 BURLEIGH COURT WINTER SPRINGS, FL 32708-4367



03102004

## DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For 59-1419201 Not Applied by

5. Certificate of Status Desired 

\$8.

No Chg-P

\$8.75 Additional Fee Required

CR2E034 (10/03)

6. Name and Address of Current Registered Agent

PALMER, CHRIS 303 BURLEIGH CT WINTER SPRINGS, FL 32708

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

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 Plorida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE					
Signature, typed or priviled name of registered agent and the if appRc.blde (NOTE Registered Agent signature required when reinstating) DATE					
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	<ol> <li>Election Campaign Finar Trust Fund Contribution.</li> </ol>	cing	\$5.00 May 8e Added to Fees	
18.	OFFICERS AND DIREC	TORS			
THE NAME STREET ADDRESS CITY-ST-ZP	P PALMER, CHRIS 303 BURLEIGH CT WINTER SPRINGS, FL 32708				
RITLE MAME STREET ADDRESS CITY-ST-ZPP	S PALMER, MARIA E 303 BURLEIGH CT WINTER SPRINGS, FL 32708				000000031785 03/18/04-80022-028 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CXY+ST-ZIP				IN '	THIS SPACE
RTLE NAME STREET ADDRESS CITY-ST-ZIP					
RITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). 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 receiver or trustee empowered to execute 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 attaching fit yith an address, with all other like empowered.					