

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Aug 17, 2007 8:00 am**  
**Secretary of State**

08-17-2007 90030 016 \*\*\*150.00

**DOCUMENT # 544823**

1. Entity Name  
**PALM STATE MANAGEMENT COMPANY, INC.**



Principal Place of Business  
**6385 PRESIDENTIAL CT., #101  
FT. MYERS, FL 33919**

Mailing Address  
**6385 PRESIDENTIAL CT., #101  
FT. MYERS, FL 33919**

**DO NOT WRITE IN THIS SPACE**



08032007 No Chg-P CR2E034 (11/05)

4. FEI Number  
**59-1788581 59-0135166**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**COPELAND, WILLIAM G.  
6385 PRESIDENTIAL CT 101  
FT. MYERS, FL 33907**

**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 Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

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

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00  
Due by September 14, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**PD  
COPELAND, WILLIAM G  
6385 PRESIDENTIAL CT 101  
FORT MYERS, FL 33907**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 attachment with an address, with another like empowered.

**SIGNATURE:**

*William G. Copeland*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**8/2/07 433-5272**

Date

Daytime Phone #

ATTACHMENT 40129485

~~#544823~~  
**Palm State Management**

6385 Presidential Court, Suite #101  
Fort Myers, FL 33919  
Phone: (239) 433 5272  
Fax: (239) 433 2921

To: Florida Department of State  
Division of Corporations  
P.O. Box 6198  
Tallahassee, FL 32314

Reference: FEI # 59-0135166

Dear Sir/Madam:

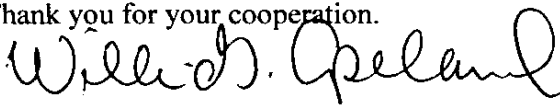
I've been trying to contact you for several months to inform that you have the incorrect FEI number on my account and therefore my corporate annual report has returned. My correct number is **59-0135166**.

I called for several months and your telephone message said it to call back in 20 minutes. Then, I tried to correct thru the state office here in Fort Myers, but they were not able to do that. I finally called another number and the lady indicated that I should send this letter with an explanation to have the late fee waived.

Please find enclosed my report with the corrected number on it and a check for a \$150.00.

Please correct your records.

Thank you for your cooperation.

  
Greg Copeland