
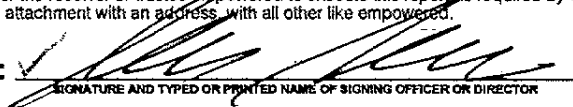


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 01, 2006 08:00 A**  
**Secretary of State**

<b>DOCUMENT # 593280</b>			
1. Entity Name GEORGE PALERMO, ARCHITECT, INC.			
Principal Place of Business 100 NORTH WASHINGTON BLVD SUITE 301 SARASOTA, FL 34236		Mailing Address 100 NORTH WASHINGTON BLVD SUITE 301 SARASOTA, FL 34236	
<b>DO NOT WRITE IN THIS SPACE</b>			
		01102006 No Chg-P CR2E034 (11/05)	
		4. FEI Number 59-1857865	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  PALERMO, GEORGE 100 NORTH WASHINGTON BLVD SUITE 301 SARASOTA, FL 34236		<b>DO NOT WRITE IN THIS SPACE</b>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
10. OFFICERS AND DIRECTORS		<div>U00000546004</div> <div>05/11/06-80100-014 150.00</div> <b>DO NOT WRITE IN THIS SPACE</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP PALERMO, GEORGE 100 NORTH WASHINGTON BLVD. STE. 301 SARASOTA, FL 34236		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SCOTT, TERESA 3233 MARION STREET ENGLEWOOD, FL 34224		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SCOTT, TERESA 3233 MARION STREET ENGLEWOOD, FL 34224		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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 all other like empowered.			
SIGNATURE: 		✓ 4/25/06 (941) 365-7777 <small>Date Daytime Phone #</small>	