
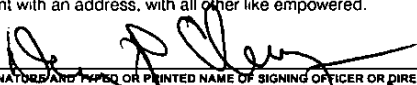


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 20, 2006 8:00 am
Secretary of State

07-20-2006 90001 016 ***150.00

DOCUMENT # 648700 1. Entity Name PALMWOOD CORPORATION, INC.					
Principal Place of Business 2326 S. CONGRESS AVE. SUITE 1-C WEST PALM BEACH, FL 33406			Mailing Address 2326 S. CONGRESS AVE. SUITE 1-C WEST PALM BEACH, FL 33406		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1971684	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CLEARY, JOHN P 11664 LAUREL VALLEY CIRCLE WEST PALM BEACH, FL 33414			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CLEARY JOHN P.		NAME		
STREET ADDRESS	220 INLET WAY		STREET ADDRESS		
CITY-ST-ZIP	PALM BEACH SHORES, FL 33404		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CLEARY TIMOTHY L.		NAME		
STREET ADDRESS	2416 S SHORE DRIVE		STREET ADDRESS		
CITY-ST-ZIP	PALM BCH GRDN, FL		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CLEARY, DENNIS M.		NAME		
STREET ADDRESS	2781 HINDA RD.		STREET ADDRESS		
CITY-ST-ZIP	LAKE PARK, FL 33403		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: 			Date 7/18/7 Daytime Phone # 301-844-8740		
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DENNIS CLEARY					

ATTACHMENT

MAX J. KOLSHAK, INC.

ACCOUNTANT

40100235
648700

July 5, 2006

Florida Department of State
Division of Corporations
Attn: Sue M. Cobb
P.O. Box 6327
Tallahassee, FL 32314

Re: Palmwood Corporation, Inc.
Annual Report 2006

Dear Ms. Cobb:

Enclosed is a check for \$150.00 to replace the one sent on February 7, 2006. The above check was returned by the Division of Corporations and we never received it or the form that was supposed to be attached as per the conversation we had today with your department. We would request that the late fee be waived.

Thank you for your cooperation in this matter.

Sincerely,

Max J. Kolshak

MJK/slp

Enclosures

File: My Documents (Sandy) /Palmwood Corp./Dept. of Corp.

ATTACHMENT

Florida Department of State		
Date	Type	Reference
1/18/2006	Bill	Doc.648700

Original Amt.
150.00

Balance Due
150.00

2/7/2006

Discount

Payment
150.00
150.00

Check Amount

40100235

PAYMENT
RECORD

Check # 71

48700

Wachovia- Reg. Ck-2 Annual Corp Report 2006

150.00

522619 (6/05)

* Visit www.sussex.ac.uk and click icon to download preprinted form.

- Submit form with check or money order.

Visit your local public library for free Internet access and assistance.

PALMWOOD CORPORATION
831 W. 13TH COURT
RIVIERA BEACH, FL 33404



**PLACE
PROPER
POSTAGE
HERE
BEFORE
MAILING**

Doc # 648700

TO:

**Division of Corporations
P.O. Box 6198
Tallahassee, FL 32314**

