## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000005252

CAY III, JOHN E

SAVANNAH, GA

25 BULL STREET

Name:

Address: City-St-Zip:

Entity Names DALMED & CAVIDIDING

FILED Mar 11, 2004 Secretary of State

**Entity Name:** PALMER & CAY HOLDINGS, INC. **Current Principal Place of Business: New Principal Place of Business:** 25 BULL STREET SAVANNAH, GA 31401 **Current Mailing Address: New Mailing Address:** PO BOX 847 SAVANNAH, GA 314020847 FEI Number: 58-2645870 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition CROWLEY, F. MICHAEL Name: Name: 25 BULL STREET Address: Address: City-St-Zip: SAVANNAH, GA City-St-Zip: Title: Title: () Delete () Change () Addition Name: EAGLE, C. STEVEN Name: 25 BULL STREET Address: Address: SAVANNAH, GA City-St-Zip: City-St-Zip: Title: Title: VD ( ) Delete () Change () Addition HOFELE, DAVID M Name: Name: 25 BULL STREET Address: Address: City-St-Zip: SAVANNAH, GA City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition LEHMAN, KAREN J SACHS, CHRISTOPHER Name: Name: Address: 25 BULL STREET Address: 25 BULL STREET City-St-Zip: SAVANNAH, GA City-St-Zip: SAVANNAH, GA Title: CD Title: () Delete () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: DAVID M. HOFELE VD 03/11/2004