2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000001401

Entity Name: CMS PALMA SOLA CORP.

MITCHELL, RICHARD A

LUTES, JOSEPH W

VAS

BALA CYNWYD, PA 19004

BALA CYNWYD, PA 19004

111 PRESIDENTIAL BLVD., SUITE 249

111 PRESIDENTIAL BLVD., SUITE 249

() Delete

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

FILED Jan 05, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: C/O CMS AFFILIATED PARTNERSHIPS 111 PRESIDENTIAL BLVD., SUITE 249 BALA CYNWYD, PA 19004 **New Mailing Address: Current Mailing Address:** C/O CMS AFFILIATED PARTNERSHIPS C/O DONNA RITTERSHAUSEN, CMS COMPANIES 111 PRESIDENTIAL BLVD., SUITE 249 1926 ARCH STREET BALA CYNWYD, PA 19004 PHILADELPHIA, PA 19103 US FEI Number: 20-1628954 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: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: (X) Change () Addition SILBERBERG, PAUL Name: Name: SILBERBERG, PAUL 111 PRESIDENTIAL BLVD., SUITE 249 111 PRESIDENTIAL BLVD., SUITE 249 Address: Address: City-St-Zip: BALA CYNWYD, PA 19004 City-St-Zip: BALA CYNWYD, PA 19004 VTD Title: Title: () Delete (X) Change () Addition LANDMAN, WILLIAM A Name: Name: LANDMAN, WILLIAM A 111 PRESIDENTIAL BLVD., SUITE 249 111 PRESIDENTIAL BLVD., SUITE 249 Address: Address: BALA CYNWYD, PA 19004 BALA CYNWYD, PA 19004 City-St-Zip: City-St-Zip: () Delete Title: VS Title: () Change () Addition

Title: VAS () Delete Title: () Change () Addition
Name: WELCH, INGRID R Name:
Address: 111 PRESIDENTIAL BLVD., SUITE 249 Address:
City-St-Zip: BALA CYNWYD, PA 19004 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

VAS

WOLOSZYN, LISA J

BALA CYNWYD, PA 19004

(X) Change () Addition

111 PRESIDENTIAL BLVD., SUITE 249

SIGNATURE: RICHARD A. MITCHELL V 01/05/2006