FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthani

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

F9400005517 (7)

PALMERS INVESTMENT CORPORATION

Principal Place of Business Mailing Address

P.O. BOX 2468 **LARGO FL 34649** P.O. BOX 2468 LARGO FL 34649

2. Principal Place of Business 2a. Mailing Address 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. 22 City & State City & State 23 28 Country Zip 25 29 30 24 9. Name and Address of Current Registered Agent

WOLFE, LARRY 200-A JOHN KNOX ROAD TALLAHASSEE FL 32303-6643



59-3269996	÷	Not Applicat \$8.75 Additional		
5. Certificate of Status Desired		Fee Required		
Flection Campaign Financing Trust Fund Contribution	בו	\$5.00 May Be Added to Fees		
 This corporation has liability for Florida Statutes 	intangible t	tax under s. 199.032,		
10. Name and Address of New I	Registered	Agent		
(P.O. Box Number is Not Accepta)	ble)			

3. Date Incorporated or Qualified 3a. Date of Last Report

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

82

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Name

City

Street Add

	, , , , , , , , , , , , , , , , , , , ,	•				
SIGNATURE _	Stunature, typed or printed name of registered agent and title if any	Noable. (NOTE R	legistarea Apent signature	required when remaining	Ą (į	
12.	OFFICERS AND DIRECT	ORS	13.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	VS	☐ DELETE	1 1 TIFLE	P	☐ Change	Add tion
NAME	Palmer, William R		1.2 NAME			•
STREET ADDRESS	11874 94TH AVE N		1.3 STREET ADDRESS	ROBERT C. PALMER 10265 ULMERTON Rd		
CITY-ST-ZIP	SEMINOLE FL		1.4 CITY - \$1 - ZIP	LARGO, FL 34641		
TITLE	V	DELETE	2 1 1111.8		☐ Change	[] Addition
NAME	PALMER, MARJORIE		2.2 NAME			
STREET ADDRESS	11874 94TH AVENUE NO.		2.3 STREET ADDRESS			
CITY-ST-ZIP	SEMINOLE FL		2.4 CITY - S1 - ZIP		,,	
TITLE	\$	DELETE	3 1 TIFLE		Change	Addition
NAME	Palmer, Marjorie		3.2 NAME			
STREET ADDRESS	11874 94TH AVENUE NO.		3.3 STREET ADDRESS			
CITY - ST - 7IP	SEMINOLE FL 34642		3 4 CI1Y - ST - ZIP		.,,	
TITLE	T	☐ DELÉTE	4 1 TITLE		Change	Addition
NAME	Palmer, Eugenia		4.2 NAME			
STREET ADDRESS	10265 ULMERTON ROAD #207		4.3 STREET ADDRESS			
CHTY - ST - ZIP	LARGO FL 34641		4 4 CHY-\$1-2IP			
TETLF		☐ DELETE	5 1 Tift.f		☐ Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREET ADDRESS			
CHTY-ST-7IP			5 4 CHY-ST-7IP		· · · · <u>· · · · · · · · · · · · · · · </u>	
TITLE		DELETE	6 1 TITLE		☐ Change	☐ Addition
NAME			6.2 NAME			
STHEET ADDRESS			6.3 STREET ADDRESS			
CHTY - ST - ZIP			64 CITY - ST - ZIP	<u> </u>		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under eath; 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 12 or Block 13 if changed, or on an attachment with an address.

813-588-4230

F94000005517

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Last year you made an error on our report.

This report should show the following:

ROBERT C. PALMER - PRES.

WILLIAM R. PALMER - VP + SEC MARJIRIE PALMER - VP

EUGENIA PALMER - TREAS.

Thank you

Crease I have
These.