2008 FOR PROFIT CORPORATION

FILED May 08, 2008 08:00 AN te

ANNUAL REPORT					Secretary of Sta			
DOCUMENT # F9900005883 1. Entity Name PALMER GENERAL, INC.					5	ecreta	ary of Sta	
		Mailing Address 31731 NORTHWESTERN HIGH FARMINGTON HILLS, MI 4833		1.1 1.1.1.1.1	:			
				04242008	No Chg-P	CR2E034 (
	OO NOT WRITE	IN THIS SPA	CE	4. FEI Numbe			Applied For Not Applicable	
al,				5. Certificate of	of Status Desired		75 Additional Required	
SUITE 100	CORPORATE BLVD	gistered Agent			NOT WI			
the obligate SIGNATURE.	e named entity submits this statement for the tions of registered agent. Signature, typed or crinted name of registered agent and the tions of the	ittle if applicable. (NOTE: Register 9. Election Campaign Fina	ed Ageni signature required	<u> </u>	المراجعة	ida. Tam fami 10 %: 1572 1-80077-	liar with, and accept	
10.	OFFICERS AND DI	RECTORS		<u> </u>		· · · · · · · · · · · · · · · · · · ·		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD BEZNOS, MAURICE J 31731 NORTHWESTERN HIGHWA FARMINGTON HILLS, MI 48334 SD BENZOS, NORMAN 31731 NORTHWESTERN HIGHWA FARMINGTON HILLS, MI 48334					Transfer Tra	and the second s	
NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE	1	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	HIS SP	ACE	,	
NAME STREET ADDRESS CITY-ST-ZIP			ng to			y distribution	The state of the s	
TITLE NAME STREET ADDRESS			, ,	, , , , , , , , , , , , , , , , , , ,				

12. Thereby 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #