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

CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

G39066 DOCUMENT # 1. Corporation Name

(7)

DAVID PALMER GENERAL CONTRACTOR, INC.

FILED Apr 16, 1996 08:00 AM **Secretary of State**



Principal Place of Business 3500 45TH STREET STE 1-A WEST PALM BEACH FL 33407		Mailing Address							
		3500 45TH STREET STE 1-A							
			WEST PALM BEACH FL 33407		3. Date incorporated or Qualified 04/25/1983	3a. [3a. Date of Last Report 03/31/1995		
2. Principal Pla	ice of Business	2a. Mailing Address				4. FEI Number			Applied For
21	Ne of Bosinoss	26				59-2292362			Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #. etc.	Suite, Apt. #. etc.			5. Certificate of Status Desired	ø		75 Additional ee Required
City & State		City & State				6. Election Canipaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
Ζιρ 24	Country 25	Zip 29	Country 30			8. This corporation has liability for intangible tax under s 199.032, Florida Statutes			
	9. Name and Address of Cu	rrent Registered Agent				10. Name and Address of New F	egister	ed Agent	
			8	1	Name				
INGRAM, LESLIE & WAGNER, PA 11130 S.E. FEDERAL HWY.			В	2	Street Addr	ddress (P.O. Box Number is Not Acceptable)			
	OUND FL 33455		8	3					
				14	City			EL 85	Zip Code
or register familiar wit	ed agent, or both, in the State of th, and accept the obligations of State of Square, typed or protect name of registered	Force: Section change was authorities to the Control of the Contro	OIE Raysteed A	пþж	ORAHOTT S DOSH	ration submits this statement for the pured of directors. I hereby accept the applications of directors are the second of directors.	DA	TF.	
12.	OFFICE.RS	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	IUE.HS	Chai	
TITLE	P	☐ DELETE	1. 1 T: II						
NAME	PALMER, DAVID	16	1.2 NAM		*D00000				
STREET ADDRESS	10310 TRAILWOOD CIRC JUPITER FL	LE	1.4 CITY		ADDRESS				
CITY - ST - ZIP	JUPIIEN PL	□ DELETE	2 1 111		1- ZIF			☐ Cha	nge 🔲 Addition
TITLE	"		2 2 NAM						
NAME STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			2.4.0(1)	Y-S	ST - ZIP				
TITLE		☐ DELETE	3 1 TIT	LE				☐ Chá	nge 🔲 Addition
NAME			3.2 NAM	νE					
STREET ADDRESS			3 3 STF	REFT	T ADDRESS				
CITY - ST - ZIP			3.4 CrT	_	51 - 71P			☐ Cha	inge Addition
TITLE		☐ DELETE	4 1 TI?						ingo 🔲 ilo t imo i
NAME			4.2 NAM		* ************				
STREET ADDRESS			1		T ADDRESS				
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THILE		□ v	5 2 NA						
NAME OFFICE ADDRESS					T ADDRESS				
STREET ADDRESS			54 CH						
CITY-ST-ZIP TITLE		DELETE	6 1 111	_				☐ Cha	ange 🔲 Addition
NAME			6 2 NA						
STREET ADDRESS					T ADDRESS				
					ST-ZIP				
CITY-ST-ZIP	.1	E. C. Cit. this films in columns in the	uniched and o	doc	se not qualify	for the exemption stated in Section 11	9.07(3)(k). Florida S	Statutes. I further

Too 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)(ii). Florida Statutes Truther certify that the information indicated on this annual report or supplemental annual report is the 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 recover or truffee empowers 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 address.

SIGNATURE: