

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 22, 1999 8:00 am
Secretary of State

02-22-1999 90030 012 ***150.00

DOCUMENT # G86663

1. Corporation Name
PALMER REALTY ASSOCIATES, INC.

Principal Place of Business

3233 SW 33RD RD
STE 201
OCALA FL 34474
US

Mailing Address

3300 SW 34TH AVENUE. STE. 148
OCALA FL 34474
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 P. O. Box 367

Suite, Apt. #, etc.

27 City & State

28 Ocala, Florida

29 Zip Country

30 34478-0367 31 Marion

9. Name and Address of Current Registered Agent

PALMER, MARGARET
709 SOUTHEAST 15TH AVE.
OCALA FL 34471

3. Date Incorporated or Qualified

02/27/1984

4. FEI Number

59-2384487

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME PALMER, WHITFIELD M JR
STREET ADDRESS 3233 SW 33RD RD STE 201
CITY-ST-ZIP Ocala FL 34474

TITLE VP
NAME BARBER, JON K
STREET ADDRESS 3233 SW 33RD RD STE 201
CITY-ST-ZIP Ocala FL 34474

TITLE S
NAME GLANZER, DOROTHY
STREET ADDRESS 3233 SW 33RD RD STE 201
CITY-ST-ZIP Ocala FL 34474

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☒ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

Dorothy Glanzer

SIGNATURE: *Dorothy Glanzer*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/5/99

Date

352-237-6145

Daytime Phone #

CR2E034 (11/98)