2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 06, 2004
Secretary of State

DOCUMENT# G87603

Entity Name: PALMDALE OIL COMPANY, INC.

Current Principal Place of Business:

120 S PARROTT AVE
OKEECHOBEE, FL 34974 US

New Principal Place of Business:

911 NORTH 2ND STREET
FT PIERCE,, FL 34950 US

Current Mailing Address:

120 S PARROTT AVE
OKEECHOBEE, FL 34974 US

New Mailing Address:

911 NORTH 2ND STREET
FT PIERCE, FL 34950 US

FEI Number: 59-2358666 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHEATHAM, WILLIAM W.
120 S PARROTT AVE
OKEECHOBEE, FL 34974

Name and Address of New Registered Agent:

CHEATHAM, LACHLAN L PRES
911 NORTH 2ND STREET
FT PIERCE, FL 34950

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: LACHLAN LE CHEATHAM 07/06/2004
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete
Name: CHEATHAM, WILLIAM,
Address: 120 S PARROTT AVE
City-St-Zip: OKEECHOBEE, FL 34974

Title: TS ( ) Delete
Name: SALMON, NITA
Address: 911 N. 2ND ST
City-St-Zip: FORT PIERCE, FL 34950

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: CHEATHAM, LACHLAN L PRES
Address: 911 NORTH 2ND STREET
City-St-Zip: FT PIERCE, FL 34950

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DV ( ) Change (X) Addition
Name: CHEATHAM, KENDALL K VICE
Address: 911 NORTH 2ND STREET
City-St-Zip: FT PIERCE, FL 34950 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: NITA SALMON TREA 07/06/2004
Electronic Signature of Signing Officer or Director Date