

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G87603

FILED
Jan 15, 2009
Secretary of State

Entity Name: PALMDALE OIL COMPANY, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

911 NORTH 2ND STREET
FT PIERCE, FL 34950 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:

BEER, JERALD S ESQ
515 NORTH FLAGLER DRIVE
SUITE 1800
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

Title: MR () Delete
Name: CHEATHAM, KENDALL VP
Address: 911 N. 2ND ST
City-St-Zip: FORT PIERCE, FL 34950

Title: MISS () Delete
Name: CHEATHAM, MALLORY SEC
Address: 911 NORTH 2ND STREET
City-St-Zip: FT PIERCE, FL 34950 US

Title: MR () Delete
Name: RESKIN, ROBERT A TRES
Address: 911 N 2ND ST
City-St-Zip: FT PIERCE, FL 34950 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ROBERT RESKIN

TRES

01/15/2009

Electronic Signature of Signing Officer or Director

_____ Date