

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H46567

Entity Name: J.J. PALMER, INC.

FILED  
Apr 14, 2009  
Secretary of State

**Current Principal Place of Business:**

% JAMES E. PALMER  
3145 KINGS ROAD  
ST. AUGUSTINE, FL 32086

**New Principal Place of Business:**

**Current Mailing Address:**

% JAMES E. PALMER  
3145 KINGS ROAD  
ST. AUGUSTINE, FL 32086

**New Mailing Address:**

FEI Number: 59-2500528

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PALMER, JAMES E.  
3145 KINGS ROAD  
ST. AUGUSTINE, FL 32086 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: PT ( ) Delete  
Name: PALMER, JACKIE  
Address: RT. 8 BOX 824C  
City-St-Zip: ST. AUGUSTINE, FL

Title: VP ( ) Delete  
Name: PALMER, JAMES  
Address: RT. 8 BOX 824C  
City-St-Zip: ST. AUGUSTINE, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PT (X) Change ( ) Addition  
Name: PALMER, JACKIE  
Address: RT. 8 BOX 824C  
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: VP (X) Change ( ) Addition  
Name: PALMER, JAMES  
Address: RT. 8 BOX 824C  
City-St-Zip: ST. AUGUSTINE, FL 32086

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: JACKIE PALMER

PRES

04/14/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date