


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2004 08:00 AM
Secretary of State

DOCUMENT # H89264
1. Entity Name
PALATKA MANAGEMENT, INC.



Principal Place of Business: % ROGER W. MATHEWS, 1202 CARR ST., PALATKA, FL 32177-4514
Mailing Address: % ROGER W. MATHEWS, 1202 CARR ST., PALATKA, FL 32177-4514



03182004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-2784844 Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
MATHEWS, ROGER W.
1202 CARR ST.
PALATKA, FL 32077

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

000000098173
03/29/04-80029-023 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MATHEWS, ROGER W.
STREET ADDRESS	2 PUTTER LANE
CITY-ST-ZIP	PALATKA, FL
TITLE	PT
NAME	MATHEWS, JOETTA
STREET ADDRESS	2 PUTTER LANE
CITY-ST-ZIP	PALATKA, FL
TITLE	VPS
NAME	MATHEWS, RANDALL S.
STREET ADDRESS	119 MYRTLEWOOD POINT RD
CITY-ST-ZIP	EAST PALATKA, FL 32131
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(9)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like employees.

SIGNATURE: *Randall S. Mathews*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 3/24/04