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FILED
May 12 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K72945

(4)

1. Corporation Name

PALM STATE EQUITIES, INC.

Principal Place of Business

721 IMAR DR
SUITE 3
SUN CITY CENTER FL 33573
US

Mailing Address

721 IMAR DR
SUITE 3
SUN CITY CENTER FL 33573-5388
US

3. Date Incorporated or Qualified

03/15/1989

3a. Date of Last Report

05/14/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

4. FEI Number

59-2935324

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

TUBEROSA, RICK
12314 MALLORY DR.
LARGO FL 34644

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 TC
NAME LUCAS, TIMOTHY
STREET ADDRESS 5883 KINGFISH DR
CITY-ST-ZIP LUTZ FL ☐ DELETE

TITLE S
NAME MORGAN, DIANE
STREET ADDRESS 244 145TH AVE E
CITY-ST-ZIP ST PETERSBURG FL ☐ DELETE

TITLE DV
NAME PERKINS, M J
STREET ADDRESS 380 CLUB MANOR DR
CITY-ST-ZIP SUN CITY CENTER FL ☐ DELETE

TITLE PCEO
NAME TUBEROSA, JAMES RICHARD
STREET ADDRESS 12314 MALLORY DR.
CITY-ST-ZIP LARGO FL ☐ DELETE

TITLE D
NAME MAHIN, RALPH C.
STREET ADDRESS 3902 BAY VISTA AVE.
CITY-ST-ZIP TAMPA FL ☐ DELETE

TITLE D
NAME GRAVESON, ALEX
STREET ADDRESS 13300 WALSINGHAM RD., APT 13
CITY-ST-ZIP LARGO FL ☒ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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

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

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

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

6.1 TITLE ☐ Change ☒ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

CECIL BURROWS, DIRECTOR
560 CARILTON SUITE 300
ST. PETERSBURG, FL 33716

14. I do hereby certify that the information supplied with this filing does not qualify for 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.

SIGNATURE:

Rick Tuberosa

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR

4/30/97

Date

813 634 8181

Daytime Phone

0361674

CR2E034 (9/96)