

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # M99151 (6)

1. Corporation Name

PALM DEVELOPMENT AND CONSTRUCTION, INC.



Principal Place of Business

Mailing Address

C/O WILLIAM STONE  
102 NE 8TH ST  
DELRAY BEACH FL 33444

C/O WILLIAM STONE  
102 NE 8TH ST  
DELRAY BEACH FL 33444

2. Principal Place of Business

2a. Mailing Address

21 7491 N. Federal Hwy  
Suite, Apt. #, etc.

26 7491 N. Federal Hwy  
Suite, Apt. #, etc.

22 #192

27 #192

23 Boca Raton, FL

28 Boca Raton FL

24 33487 25 Palm Beach

29 33487 30 Palm Beach

9. Name and Address of Current Registered Agent

STONE, WILLIAM  
102 GEROGE DUCH BLVD  
DELRAY BEACH FL 33444

3. Date Incorporated or Qualified

09/19/1988

3a. Date of Last Report

08/21/1995

4. FET Number

65-0091235

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

7491 N. Federal Hwy  
#192

83 City

Boca Raton

FL

85 Zip Code

33487

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 of individual or corporate name of registered agent (and FET application)

Signature of registered agent (signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME STONE, WILLIAM  
STREET ADDRESS 102 NE 8TH ST  
CITY-ST-ZIP DELRAY BEACH FL ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS 7491 N. Federal Hwy #192  
1.4 CITY-ST-ZIP Boca Raton FL 33487

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE #

CR2E034 (12/95)