

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 18, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000050273
 1. Entity Name
 PALM HOUSE PUBLISHING, INC.



Principal Place of Business 3210 DADE AVENUE ORLANDO, FL 32804 US	Mailing Address 3210 DADE AVENUE ORLANDO, FL 32804 US
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DO NOT WRITE IN THIS SPACE



07052005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3650768	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 JONES, RONNIE J
 2021 WATER KEY DR
 WINDERMERE, FL 34786

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)
 Signature, typed or printed name of registered agent and title if applicable

11000000373264
 07/18/05-80008-010 150.00
 DATE

FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD JONES, RONNIE J 2021 WATER KEY DR WINDERMERE, FL 34786
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD JONES, MARYJO T 2021 WATER KEY DR WINDERMERE, FL 34786
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 or without other like empowered.

SIGNATURE: Ronnie J. Jones
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14 July 05 407-228-9772
 Date Daytime Phone