

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000042118

FILED
Aug 18, 2005
Secretary of State

Entity Name: PALM SALES & MARKETING, INC.

Current Principal Place of Business:

5 RIVERDALE AVE
ORMOND BCH, FL 32174

New Principal Place of Business:

105 TIMBERLINE TR.
ORMOND BCH, FL 32174

Current Mailing Address:

5 RIVERDALE AVE
ORMOND BCH, FL 32174

New Mailing Address:

105 TIMBERLINE TR.
ORMOND BCH, FL 32174

FEI Number: 59-3712068

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FLORIDA STATE ACCOUNTING, INC.
533 N NOVA RD STE 115
ORMOND BCH, FL 321744421 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

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FULLER, BRIAN
Address: 5 RIVERDALE AVE
City-St-Zip: ORMOND BCH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FULLER, BRIAN
Address: 105 TIMBERLINE TR.
City-St-Zip: ORMOND BCH, FL 32174

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BRIAN FULLER

D

08/18/2005

Electronic Signature of Signing Officer or Director

Date