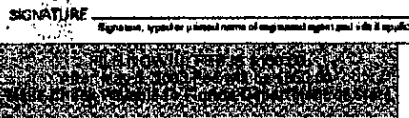
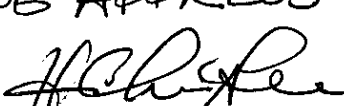


FILED
Apr 22, 2003 8:00 am
Secretary of State

04-22-2003 90042 034 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000054159		
1. Entity Name PALM CITY PROPERTIES, INC.		
Principal Place of Business 901 SW MARTIN DOWNS BLVD SUITE 2000 PALM CITY, FL 34990		Mailing Address 901 SW MARTIN DOWNS BLVD SUITE 2000 PALM CITY, FL 34990
2. Principal Place of Business 1081 SW LIGHTHOUSE DR		3. Mailing Address 1081 SW LIGHTHOUSE DR
Suite, Apt. #, etc. N/A		Suite, Apt. #, etc. N/A
City & State PALE CITY, FL		City & State PALE CITY, FL
Zip 34990		Zip 34990
4. FEI Number 65-1073303		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Name and Address of Current Registered Agent MC GEE, H. CONWAY 1081 SW LIGHTHOUSE DR. PALM CITY, FL 34990
7. Name and Address of New Registered Agent		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 		DATE 4/12/2003
9. Officers and Directors		10. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE P		TITLE ☐ Change ☐ Addition
NAME MC GEE, H. CONWAY		NAME ☐ Change ☐ Addition
STREET ADDRESS 1081 SW LIGHTHOUSE DR.		STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP PALM CITY, FL 34990		CITY-ST-ZIP ☐ Change ☐ Addition
TITLE V		TITLE ☐ Change ☐ Addition
NAME MC GEE, AMANDA T		NAME ☐ Change ☐ Addition
STREET ADDRESS 1081 SW LIGHTHOUSE DR.		STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP PALM CITY, FL 34990		CITY-ST-ZIP ☐ Change ☐ Addition
TITLE ☐ Delete		TITLE ☐ Change ☐ Addition
NAME ☐ Delete		NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Delete		STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Delete		CITY-ST-ZIP ☐ Change ☐ Addition
TITLE ☐ Delete		TITLE ☐ Change ☐ Addition
NAME ☐ Delete		NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Delete		STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Delete		CITY-ST-ZIP ☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 190.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 affidavit with authority to sign.		
SIGNATURE:  4/12/2003		

* PLEASE NOTE THAT ONLY CHANGE IS A
CHANGE TO THE "PRINCIPAL PLACE OF BUSINESS"
+ TO THE "MAILING ADDRESS"
THANK YOU  PRESIDENT