

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2004 8:00 am
Secretary of State

02-06-2004 90037 033 ***150.00

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DOCUMENT # P03000070096 1. Entity Name ROYAL PALM CAPITAL GROUP, INC.																																									
Principal Place of Business 625 N. FLAGLER DRIVE 509 WEST PALM BEACH, FL 33410 US			Mailing Address 625 N. FLAGLER DRIVE 509 509 WEST PALM BEACH, FL 33410 US																																						
2. Principal Place of Business			3. Mailing Address																																						
Suite, Apt. #, etc.			Suite, Apt. #, etc.																																						
City & State			City & State																																						
Zip		Country		Zip																																					
				Country																																					
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent																																					
ZANARDI, DAVID G 625 N. FLAGLER DRIVE 509 509 WEST PALM BEACH, FL 33410				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>																																					
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) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>																																									
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																						
<div style="display: flex;"> <div style="flex: 1;"> 10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;"> CEO PEARCE, ROBERT W 625 N. FLAGLER DRIVE, SUITE 509 WEST PALM BEACH, FL 33410 </td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>TITLE</td> <td> P KIRSCHNER, PETER 625 N. FLAGLER DRIVE, SUITE 509 WEST PALM BEACH, FL 33410 </td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>TITLE</td> <td> VP O'KANE, JAMES K 625 N. FLAGLER DRIVE, SUITE 509 WEST PALM BEACH, FL 33410 </td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>TITLE</td> <td> Chairman PARKER, GERALD C 625 N. FLAGLER DRIVE, SUITE 509 WEST PALM BEACH, FL 33410 </td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> </table> </div> <div style="flex: 1;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">NAME</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> </table> </div> </div>						TITLE	CEO PEARCE, ROBERT W 625 N. FLAGLER DRIVE, SUITE 509 WEST PALM BEACH, FL 33410	<input type="checkbox"/> Delete	TITLE	P KIRSCHNER, PETER 625 N. FLAGLER DRIVE, SUITE 509 WEST PALM BEACH, FL 33410	<input type="checkbox"/> Delete	TITLE	VP O'KANE, JAMES K 625 N. FLAGLER DRIVE, SUITE 509 WEST PALM BEACH, FL 33410	<input type="checkbox"/> Delete	TITLE	Chairman PARKER, GERALD C 625 N. FLAGLER DRIVE, SUITE 509 WEST PALM BEACH, FL 33410	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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)(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 address, with all other like empowered.																																									
SIGNATURE: <u>Robert W. Pearce</u> 2-2-04 5:11-820-2444 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																																									