

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 14, 2006 08:00 AM
Secretary of State**

DOCUMENT # P04000044160

**1. Entity Name
THE PALMETTO CANYON COMPANY**



**Principal Place of Business
6625 CORMORANT CT
SOUTH PASADENA, FL 33707 US**

**Mailing Address
6625 CORMORANT CT
SOUTH PASADENA, FL 33707 US**



04102006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

**4. FEI Number
90-0152150**

**Applied For
Not Applicable**

**5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MCCARTHY, VAUGHN
6625 CORMORANT CT
SOUTH PASADENA, FL 33707**

**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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling) **DATE** _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

**TITLE P
NAME MCCARTHY, VAUGHN E
STREET ADDRESS 6625 CORMORANT CT
CITY-ST-ZIP SOUTH PASADENA, FL 33707**

**TITLE VP
NAME MCCARTHY, ELISE C
STREET ADDRESS 6625 CORMORANT CT
CITY-ST-ZIP SOUTH PASADENA, FL 33707**

**TITLE S
NAME MCCARTHY, KYLE R
STREET ADDRESS 6625 CORMORANT CT
CITY-ST-ZIP SOUTH PASADENA, FL 33707**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**000000509814
04/28/06-80060-002 150.00**

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 without being empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

VAUGHN MCCARTHY

4.12.06 127-8662445