

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000003015

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

**Entity Name:** PALM ISLAND SPICE COMPANY

**Current Principal Place of Business:**

5093 IRONWOOD TRAIL  
BARTOW, FL 33830 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1086  
HIGHLAND CITY, FL 338469998

**New Mailing Address:**

**FEI Number:** 20-2144267

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

VINING, C. GREOFFREY  
1611 HARDEN BOULEVARD  
LAKELAND, FL 33803 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

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** MCCAUSLAND, TIMOTHY J  
**Address:** 5093 IRONWOOD TRAIL  
**City-St-Zip:** BARTOW, FL 33830 US

**Title:** V  
**Name:** MCCAUSLAND, SHARON S  
**Address:** 5093 IRONWOOD TRAIL  
**City-St-Zip:** BARTOW, FL 33830 US

I hereby 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 all other like empowered.

**SIGNATURE:** SHARON S MCCAUSLAND

V

04/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date