

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000063328

FILED  
May 01, 2007  
Secretary of State

Entity Name: PALMCORP CONSTRUCTION SERVICES, INC.

## Current Principal Place of Business:

400 CYPRESS DRIVE  
SUITE 1  
TEQUESTA, FL 33469

## New Principal Place of Business:

## Current Mailing Address:

400 CYPRESS DRIVE  
SUITE 1  
TEQUESTA, FL 33469

## New Mailing Address:

FEI Number: 20-2910536

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PALMIERI, RUSSELL  
400 CYPRESS DRIVE  
SUITE 1  
TEQUESTA, FL 33469 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: VD ( ) Delete  
Name: PALMIERI, RUSSELL  
Address: 400 CYPRESS DRIVE SUITE 1  
City-St-Zip: TEQUESTA, FL 33469

Title: P ( ) Delete  
Name: PALMERI, BUD  
Address: 400 CYPRESS DRIVE SUITE 1  
City-St-Zip: TEQUESTA, FL 33469

Title: V ( ) Delete  
Name: BELL, WILLIAM  
Address: 400 CYPRESS DRIVE SUITE 1  
City-St-Zip: TEQUESTA, FL 33469

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: BUD PALMIERI

P

05/01/2007

Electronic Signature of Signing Officer or Director

Date