2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000115396

Entity Name: PALM PRESERVATION, INC.

FILED Jul 06, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

715 RIVERSIDE DR 715 RIVERSIDE DR

TARPON SPRINGS, FL 34689 US

Current Mailing Address: New Mailing Address:

715 RIVERSIDE DR 715 RIVERSIDE DR

TARPON SPRINGS, FL 34689 US

FEI Number: 20-3345925 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SPIEGEL & UTRERA, P.A.

1840 SW 22ND ST.

ATH FLOOR

SOLUTION

SOLUTION

ROBERT F. DIMARCO, C.P.A. PA

3444 EAST LAKE ROAD

SOLUTION

SO

MIAMI, FL 33145 US PALM HARBOR, FL 34685 US

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: ROBERT DIMARCO 07/06/2006

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVTD () Delete Title: PVTD (X) Change () Addition

 Name:
 KUNZ, MICHAEL
 Name:
 KUNZ, MICHAEL

 Address:
 715 RIVERSIDE DR
 Address:
 715 RIVERSIDE DR

City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: TARPON SPRINGS, FL 34689 US

 Name:
 KUNZ, MICHELLE L
 Name:
 KUNZ, MICHELLE L

 Address:
 715 RIVERSIDE DR
 Address:
 715 RIVERSIDE DR

City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: TARPON SPRINGS, FL 34689 US

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL KUNZ P/S 07/06/2006