2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 14, 2005
Secretary of State

DOCUMENT# P93000033485

Entity Name: PALMA SOLA DEVELOPMENT, INC.

Current Principal Place of Business:

6040 SR 70
BRADENTON, FL 34203 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 257
BRADENTON, FL 34206 US

New Mailing Address:

FEI Number: 65-0420152 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KNOWLES, VIRGINA
1218 DE NARVAEZ AVE
BRADENTON, FL 34209 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BADEN, H R
Address: 38820 TAYLOR RD.
City-St-Zip: MYAKKA CITY, FL 34251

Title: VPD ( ) Delete
Name: BADEN, CHRISTOPHER
Address: 316 20TH ST W
City-St-Zip: BRADENTON, FL 34205

Title: TD ( ) Delete
Name: KNOWLES, VIRGINIA
Address: 1218 DE NARVAEZ AVE
City-St-Zip: BRADENTON, FL 34209

Title: SD ( ) Delete
Name: BADEN, SARA B
Address: 38820 TAYLOR RD.
City-St-Zip: MYAKKA CITY, FL 34251

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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: VIRGINIA KNOWLES TD 05/14/2005

Electronic Signature of Signing Officer or Director Date