

FILED
Apr 27, 2007 8:00 am
Secretary of State

04-11-2007 90014 048 ***150.00

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P94000008356			
1. Entry Name PALM COAST RENTAL PROPERTIES, INC.			
Principal Place of Business 8211 BAMA LANE, UNIT 5 WEST PALM BEACH, FL 33411 US		Mailing Address P.O. BOX 210396 ROYAL PALM BEACH, FL 33421 US	
DO NOT WRITE IN THIS SPACE			
		03262007 No Chg-P CR2E034 (11/05)	
		4. FEI Number 65-0484776	Applied For ☐ Not Applicable
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CARTER, PHILLIP 8211 BAMA LANE UNIT 5 WEST PALM BEACH, FL 33411		DO NOT WRITE IN THIS SPACE	
8. The above named entry 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 <u><i>Philip R Carter</i></u> DATE <u>4/2/07</u> Signature typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when re-registering)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CARTER, PHILIP R 8211 BAMA LANE, UNIT 5 WEST PALM BEACH, FL 33411		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CARTER, PHILIP 8211 BAMA LANE UNIT 5 WEST PALM BEACH, FL 33411		
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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, with all other line employees.			
SIGNATURE <u><i>Philip R Carter</i></u>		Date _____ Daytime Phone # _____	

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