

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000088445 (9)

1. Corporation Name

PALM ACTS, INC.

Principal Place of Business

1301 W NEWPORT CENTER DR
DEERFIELD BEACH FL 33442
US

Mailing Address

1301 W NEWPORT CENTER DR
DEERFIELD BEACH FL 33442-7734
US



3. Date Incorporated or Qualified

12/06/1994

3a. Date of Last Report

04/29/1996

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

65-0544884

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☒ No

22

27

23

28

24

25

29

30

9. Name and Address of Current Registered Agent

MCKNIGHT, N. PHILIP
1301 W. NEWPORT CENTER DR.
DEERFIELD BEACH FL 33487

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D

VAN ARNEM, HAROLD L
1301 W NEWPORT CENTER DR
DEERFIELD BEACH FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

PD

MCKNIGHT, N. PHILIP
1301 W NEWPORT CENTER DR
DEERFIELD BEACH FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

T

DECKER, JULIA M
1301 W NEWPORT CENTER DR
DEERFIELD BEACH FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

S

ALLEN, BETTY E
1301 W NEWPORT CENTER DR
DEERFIELD BEACH FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Betty E. Allen
BETTY E. ALLEN - SECRETARY

4/29/97

954-419-1370

0323197

CR2E034 (9/96)