

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000036881

**FILED**  
**Apr 06, 2010**  
**Secretary of State**

**Entity Name:** THE PALMS TREE SERVICE, INC.

**Current Principal Place of Business:**

11210 CHEROKEE DR  
MADEIRA BEACH, FL 33708 US

**New Principal Place of Business:**

**Current Mailing Address:**

11210 CHEROKEE DR.  
MADEIRA BEACH, FL 33708 US

**New Mailing Address:**

**FEI Number:** 59-3323559

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ORR, SHIRLEY M  
12210 CHEROKEE DR  
MADEIRA BEACH, FL 33708 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: PRES  
Name: ORR, SHIRLEY M  
Address: 11210 CHEROKEE DR  
City-St-Zip: MADEIRA BEACH, FL

Title: V  
Name: ORR, STEPHEN  
Address: 11210 CHEROKEE DR  
City-St-Zip: MADEIRA BEACH, FL

Title: S  
Name: ORR, GRAHAM H  
Address: 11210 CHEROKEE DR  
City-St-Zip: MADEIRA BEACH, FL

I hereby 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 all other like empowered.

**SIGNATURE:** SHIRLEY M. ORR

PRES

04/06/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date