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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000040481 (0)

PALM ILLUMINATION, INC.

## FILED May 12 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 1433 DEER CREEK DRIVE 1433 DEER CREEK DRIVE ENGLEWOOD FL 34223 **ENGLEWOOD FL 34223** DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 05/22/1995 2s. Mailing Address 2. Principal Place of Business Applied For 21 26 65-0597891 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Tho Zip Country Źφ Country ☐ Yes 24 25 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ITTERSAGEN, SCOTT D BATSEL, MCKINLEY, ITTERSAGEN, ET AL Street Address (P.O. Box Number is Not Acceptable) 1861 PLACID ROAD, SUITE 204 83 **ENGLEWOOD FL 34223** 84 City 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETÉ 1.1 TITLE Change Addition NAME MATTENLEY, PETE 1.2 NAME CR2E034 1433 DEER CREEK DRIVE STREET ADDRESS 1.3 STREET ADDRESS ENGLEWOOD FL 34223 CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 21 TITLE TITLE MATTENLEY, JOAN NAME 2.2 NAME 1433 DEER CREEK DRIVE STREET ADDRESS 2.3 STREET ADDRESS ENGLEWOOD FL 34223 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME **3.3 STREET ADDRESS** STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADORESS 44 CITY - ST - 7IP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP Addition TITLE DELETE 6.1 TITLE Change NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this ennual 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 an attachment with an address.

SIGNATURE:

4-29-98 941-475-3173