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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000090720 (9)

PALMER ORCHIDS, INC.

Principal Place of Business Mailing Address

FILED May 06 1998 8:00am Secretary of State



22700 TAYLOR DRIVE BRADENTON FL 34202		22700 TAYLOR DRIVE BRADENTON FL 34202		DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified				
					10/29/1996			
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	A	pplied For		
21		26		59-3413694		lot Applicable		
Suite, Apt. #, etc		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & Sta	10	City & State	28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24	Country 25	Ζιρ 29	Zip Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered	Agent		
PA	LMER, ROBERT		81	Name				
22700 TAYLOR DRIVE BRADENTON FL 34202			82	Street Ado	ddress (P.O. Box Number is Not Acceptable)			
			83	-			:	
			84	City		85 Zip	Code	
			المحادث المحادث	Ony	FL	. 65 44	, 5000	
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 ag				uired when reinstating) DATE			
12.		ND DIRECTORS	13.	Jenan i requ	ADDITIONS/CHANGES TO OFFICERS ANI	DIRECTO	RS IN 12	
TITLE	D DELETE 1.1		1.1 TITLE			Change		
NAME			1.2 NAME			_ •		
STREET ADDRESS 22700 TAYLOR DRIVE			1.3 STREET	ADDRESS			ļ	
CITY-ST-ZIP	BRADENTON FL 34202		1.4 CITY - S				ļ	
TITLE	D DELETE		2.1 TITLE			Change	Addition	
NAME	PALMER, ELIZABETH		2.2 NAME					
STREET ADDRESS	8700 CR 17TH SOUTH		2.3 STREET	ADDRESS				
CITY-ST-ZIP	SEBRING FL 33870		2. 4 CITY -					
TITLE	1	DELETE	3.1 TITLE			Change	☐ Addition	
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY-ST-ZIP		• •	3.4. CITY-5	ST-ZIP				
TITLE	. DELETE		. 4.1 TITLE			Change	Addition	
NAME	MANE .		4.2 NAME				j	
STREET ADDRESS	TREET ADDRESS		4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CITY+\$	IT- ZIP				
TITLE		DELETE 5.1 TI				Change	Addition	
NAME	1		5.2 NAME				ł	
STREET ADDRESS			5.3 STREET	ADDRESS			ł	
CITY-ST-ZIP			5 4 CITY-S	IT- ZIP				
TITLE		DELETE	6.1 TITLE			Change	Addition	
NAME			6.2 NAME					
STREET ADDRESS	}		6.3 STREET	ADDRESS				
CITY OF THE	I		SACITY.	T. 7(D				

14. I 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 expowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

1912-719-7947