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 # P97000050327 (0)

PALMER REALTY INC.

(MEMIE)	ii iicivei i										
Principal Place	e of Busines	\$	Maili	Mailing Address					- I TOOTOPOL TIE TOTT OOT OOT BELLE ENTLY OUT BITT DETEN FLIED TEET TOET TO		
•				•							
4134 GULF OF MEXICO DRIVE SUITE 302				4134 GULF OF MEXICO DRIVE SUITE 302							
LONGBOAT KEY FL 34228				LONGBOAT KEY FL 34228					DO NOT WRITE IN THIS SPACE		
									3. Date Incorporated or Qualified		
									06/05/1997		
2. Principal P	lace of Busin	ness	2a. N	2a. Mailing Address					4. FEI Number X Applied For		
21			26	26					Not Applicat	ole	
Suite, Apt.	#, etc.		s	Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional	1	
22			27						Fee Required		
City & State	е			City & State					6. Election Campaign Financing \$5.00 May Be		
23			28						Trust Fund Contribution		
Zip	ip Country			Z(p) Cour			•		8. This corporation owes or has paid the current year Intangible]	
24	25		29	<u> </u>					Personal Property Tax due June 30. Yes No		
	9, Name	and Address of Curre	nt Register	red Agent		ļ.,,			10. Name and Address of New Registered Agent		
CO	LES, JASO	N D				81	Name	9			
4134 GULF OF MEXICO DRIVE							Stree	t Addres	Address (P.O. Box Number is Not Acceptable)		
SUI	TE 302										
LOI	NGBOAT K	EY FL 34228				83					
						84	City	··	85 Zip Code		
						"	City		FL 85 Zip Code		
11. Pursuant	to the provisi	ions of Sections 607.05	02 and 607	.1508, Florida Statu	tes, the a	bove	-name	d corpor		∌d	
office or re	egi ste red ag m f am iliar wi	ent, or both, in the Stat thi and accept the obli	e of Florida riations of S	Such change was Rection 607 0505. Fl	authorize orida Sta	d by tutes	the co	irporation	oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered	'	
		th and dood, the son	garena an r							İ	
SIGNATURE	Signature, typed	or printed nume of registered a	gent and title if a	pplicable (NO	E: Registere	d Ago	nt signatu	re required	d when reinstating) DATE	-	
12.		OFFICERS AF	ND DIRECTO	ORS	13.				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D			☐ DELETE	1.11	TLE			☐ Change ☐ Additi	ion	
NAME	COLES, JASON D			1.2 N				i			
STREET ADDRESS	4134 GL	JLF OF MEXICO DRI	VE	1.3 \$1			ADDRESS	;		- 1	
CITY-ST-ZIP	LONGEC	DAT KEY FL 34228			1.4 C	(1Y-S	T-ZIP			J	
TITLE				DELETE	2.1 7	TLE			Change Additi	ion	
NAME					2.2 N	AME		}		- }	
STREET ADDRESS					2.3 S	TREET	ADDRESS	;			
CITY-ST-ZIP					240	HY-S	1 - 7/P				
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NAME					3.2 N	AME				Ì	
STREET ADDRESS					335	TREFT	ADDRESS	.]		- 1	
CITY-ST-ZIP					1	ity-s					
TITLE				DELETE	4.1 1		17 617	 	☐ Change ☐ Additi	ion	
NAME					4.21				• - -		
STREET ADDRESS	· 						ADDRESS			ł	
CITY-ST-ZIP						ITY-S					
TITLE				DELETE	5.1 Ti			+-	☐ Change ☐ Additi	ion	
NAME					5.2 N						
STREET ADDRESS							ADDRESS	.	λu_{λ}	l	
					1				75/2 '	ſ	
CITY-ST-ZIP TITLE				☐ DELETE	5.4 C	ITY-S'	1 - EII'	 	☐ Change ☐ Additi	ion	
				_ beer	6.2 N					-"	
NAME OVEREZ ADDRESS							4BDPF00		800002538778 -05/28/9801038012	Ī	
STREET ADDRESS					638	INEE	ADDRESS		***150.00		

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 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 actuachyten with an address.

CICNATURE.

TARRIER POLES

ereal

4/23/98

941-287-0809

FILED

May 27 1998 8:00am

Secretary of State