

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000062690

Entity Name: PALM BEACH TROWEL, INC.

FILED
Mar 06, 2009
Secretary of State

Current Principal Place of Business:

479 LAKE ANTHORPE DR
LAKE PLACID, FL 33852 US

New Principal Place of Business:

Current Mailing Address:

479 LAKE ANTHORPE DR
LAKE PLACID, FL 33852 US

New Mailing Address:

FEI Number: 65-0766909

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARK, DANIEL G SR
479 LAKE ANTHORPE DR
LAKE PLACID, FL 33852 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: DP () Delete
Name: CLARK, DANIEL G SR
Address: 479 LAKE ANTHORPE DR
City-St-Zip: LAKE PLACID, FL 33852

Title: DVP () Delete
Name: CLARK, SUE
Address: 479 LK ANTHORPE DR
City-St-Zip: LAKE PLACID, FL 33852

Title: DS () Delete
Name: CLARK, DANIEL G JR
Address: 479 LK ANTHORPE DR
City-St-Zip: LAKE PLACID, FL 33852

Title: DT () Delete
Name: CLARK, CLARENCE
Address: 479 LAKE ANTHORPE DR.
City-St-Zip: LAKE PLACID, FL 33852

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CLARK, DANIEL G SR
Address: 479 LAKE ANTHORPE DR
City-St-Zip: LAKE PLACID, FL 33852 US

Title: DVP (X) Change () Addition
Name: CLARK, SUE
Address: 479 LK ANTHORPE DR
City-St-Zip: LAKE PLACID, FL 33852 US

Title: DS (X) Change () Addition
Name: CLARK, DANIEL G JR
Address: 479 LK ANTHORPE DR
City-St-Zip: LAKE PLACID, FL 33852 US

Title: DT (X) Change () Addition
Name: CLARK, CLARENCE
Address: 479 LAKE ANTHORPE DR.
City-St-Zip: LAKE PLACID, FL 33852 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DANIEL G CLARK SR

PRES

03/06/2009

Electronic Signature of Signing Officer or Director

_____ Date