

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000035555

**FILED**  
**Feb 22, 2006**  
**Secretary of State**

**Entity Name:** MICHAEL PALM CONSTRUCTION, INC.

**Current Principal Place of Business:**

11033 EIDER AVE.  
BROOKSVILLE, FL 34613

**New Principal Place of Business:**

11033 EIDER AVENUE  
BROOKSVILLE, FL 34613

**Current Mailing Address:**

11033 EIDER AVE.  
BROOKSVILLE, FL 34613

**New Mailing Address:**

11033 EIDER AVENUE  
BROOKSVILLE, FL 34613

**FEI Number:** 59-3507348

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MIZIO, ARMANDO F  
25400 U.S. 19 NORTH  
SUITE 210  
CLEARWATER, FL 33763 US

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

MIZIO, ARMANDO F  
25400 U.S. HWY 19 NORTH  
SUITE 210  
CLEARWATER, FL 33763 US

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: ARMANDO F. MIZIO

02/22/2006

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DPST ( ) Delete  
Name: PALM, MICHAEL S  
Address: 11033 EIDER AVE.  
City-St-Zip: BROOKSVILLE, FL 34613

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PSTD (X) Change ( ) Addition  
Name: PALM, MICHAEL S  
Address: 11033 EIDER AVENUE  
City-St-Zip: BROOKSVILLE, FL 34613

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL S. PALM

PSTD

02/22/2006

Electronic Signature of Signing Officer or Director

Date