**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Kathe ine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9800036151

1. Corporation Name

PALM AIRE POLK, INC.

## **FILED** Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90015 009 \*\*\*150.00

Principal Place	e of Business		Mailing Address			l					
100 S. ASHLEY	DRIVE STE. 1770		100 S. ASHLEY DRIVE S	TE. 1770							
TAMPA FL 3360	)2		TAMPA FL 33602			İ		DO NOT WE	OTE IN THE	SSDACE	
						3 Date	e lucorporat	ted or Qualifed		0 01 /102	
							/21/1998				
2 Principal Pl	lace of Business		2a. Mailing Address				Ni mbar			<u>.</u> А	pried For
3 2225	< MAC	DILL A	1/26			ž.	59-	350	540 (		ot Applicable
Suite, Act.	#. etc.	DICC 11	Suite, Apt. #, etc.								Additional
22 20			27	.al_		5. Cert	tifcate of Sta	atus Desired		Fee R	ec uired
City & State	<u>-</u> ———		City & State			6. Elec	ction Campa	aign Financing		\$5.00	May Be
23 TMM			28			Trus	st Fund Con	tribution	' D	Added	tc Fees
Zip	Cour	try	Zip	Count	ry	g. This	s cc rporation	n owes the cu	rrent year i		
24 334?6	<del>7</del> 9 [25] ()	SA	29	30		Pers	sor al Prope	rty Tax.		Yes	∐No
	9. Name and Add	ress of Current	Registered Agent		_,		me and Add	dress of New	Registere	d Agent	
DUAD	IN DAVE			8	Name	1 744	<i>J&amp;</i> ' િ	Pippil	)		
	IN, DAVE	OTE 4770		18	2 Street	Acdress (P.O. E	Box Number	r is Not Accep	table).	^ ^	
	S. ASHLEY DRIVE	SIE. 1//0				<u>25 S.</u>	<u>. m</u>	AC DI	<u> </u>	AU E	
IAM	PA FL 33602			8	3	t- =	209				
				1	14 City	<u>. v E                                  </u>	<del>/()                                    </del>	•		85 <u>Zi</u> p.	Code _
				1	7	Emen			F	LII3:	31029
11. Pursuant	to the provisions of Se	ctions 607.0502	and 607.1508, Florida Statu	ites, the abo	ve-named	corporation sub	omits this sta	atement for th	e purpose : ept the app	of changing its cintment as re	s r∋gistered ea stered
				HUMBULE CU L	, y u 10 001 p	012 (101) 5 500/0	or choocers.		~P. M. C. ~PP.	, ,	
agent. I a	egistered age <del>nt, or be</del> m familiar with, and a	capt the objection	<del>419 of, Section</del> 607.0505, F	lorida Statut	9S.					/ /~~	1
	to the provisions of Si egistered agent, or be m familiar with, and a	capt the objection	$\overline{}$							7/59	
agent. I al	egistered agent, or be m familiar with, and ac Signature, typed or printed no	ne of registered agent	and title if applicable. (NO	T :: Registered A		required when reinstat	iting)		DATE	7/79	
SIGNATURE	egistered agent, or be m familiar with, and a Signature, typed of printed no	El-	and title if applicable. (NO	T :: Registered A	gent signature	required when reinstat	iting)	ANGES TO O	DATE	7/79	OF:S IN 12
SIGNATURE  12.  TITLE	egistered agent, or be m familiar with, and ac Signalule, speed or printed ne	ne of registered agent	and title if applicable. (NO	T :: Registered A  13. 11 TITL	gent signature	required when reinstate ADD	oling) HTIONS/CH/	ANGES TO O	DATE OFFICERS	7/79  AND DIRECTO	
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14. I hereb / 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 cartify that the information indicated on this annual report or supplemental annual report is true and accultage 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 attack nent with an address, with a lother like empowered.

SIGNATURE: