2006 FOR PROFIT CORPORATION

Jan 23, 2006 08:00 AM **ANNUAL REPORT Secretary of State** DOCUMENT # P99000011512 1. Entity Name THE PALMER RANCH & CATTLE COMPANY Principal Place of Business Mailing Address 312 SE 17TH ST., STE. 300 FT. LAUDERDALE, FL 33316 20999 COUNTY RD 832 LABELLE, FL 33935 No Chg-P CR2E034 (11/05) 01052006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0893302 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent DO NOT WRITE PALMER, CHARLES L 312 SE 17TH ST., STE. 300 FT. LAUDERDALE, FL 33316 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. Signature typed or printed name of registered agent and the if applicable (NOTE: Registered Agent signships required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS DD) E NAME PALMER, CHARLES L 312 SE 17TH ST., STE 300 STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33316 NAME STREET ADDRESS DIY-51-70 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZP IN THIS SPACE 3,717 NAME STREET ADDRESS C17Y-ST-ZIP MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oalls; that I am an officer or director of the corporation or the receiver or rustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/06

FILED