


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 28, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # P99000017019**

1. Entity Name  
**PALMER AND PALMER REAL ESTATE CORPORATION**



Principal Place of Business      Mailing Address

**6299 W SUNRISE BLVD STE 210**      **6299 W SUNRISE BLVD STE 210**  
**FORT LAUDERDALE, FL 33313**      **FORT LAUDERDALE, FL 33313**

**DO NOT WRITE IN THIS SPACE**



04262004    No Chg-P    CR2E034 (10/03)

4. FEI Number  
**65-0924237**      Applied For  
 Not Applicable

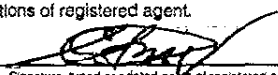
5. Certificate of Status Desired     **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**PALMER, EMANUEL S**  
**3330 SPANISH MOSS TERR.**  
**LAUDERHILL, FL 33319**

**DO NOT WRITE 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:       DATE: \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.     **\$5.00 May Be Added to Fees**

1100000135489  
 04/28/04-90062-007 159.75

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVD PALMER, EMANUEL S 3330 SPANISH MOSS TERR APT 401 LAUDERHILL, FL 33319
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PALMER, JACQUELYN 3330 SPANISH MOSS TERR LAUDERHILL, FL 33319
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:       Date: **4-26-2004**      Daytime Phone #: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR