2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000063581

PALM RIVER DEVELOPMENT CO., INC.



Principal Place of Business

2100 W CYPRESS CREEK RD FORT LAUDERDALE, FL 33309 Mailing Address

2100 W CYPRESS CREEK RD FORT LAUDERDALE, FL 33309

FILED Apr 28, 2008 8:00 am Secretary of State

04-28-2008 90320 023 ***150.00



DO NOT WRITE IN THIS SPACE

04152008 No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0934434

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NGUYEN, DOQUYEN 2100 W CYPRESS CREEK RD FORT LAUDERDALE, FL 33309

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pailons of registered agent.	urpose of changing its register	ed office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typec or printed name of registered agent and title if	analyzabia (SIOTE Projetore	An American signature required union rejectation	DATE
	Signature, types or privated name or registered agent and line in	applicable. (NO/E; Registere	ed Agent signature required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.		
10.	OFFICERS AND DIREC	TORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEVAN, ALAN B 2100 W CYPRESS CREEK RD FORT LAUDERDALE, FL 33309			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVPD SNYDER, MARCIA 2100 W CYPRESS CREEK RD FORT LAUDERDALE, FL 33309			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT TOALSON, VALERIE 2100 W CYPRESS CREEK RD FORT LAUDERDALE, FL 33309		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MCCLUNG, JAY C 2100 W CYPRESS CRK RD FORT LAUDERDALE, FL 33309			THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DRAPOS, LINDA M 2100 W CYPRESS CRK RD FORT LAUDERDALE, FL 33309			

12. I hereby certify that the information supplied with this filling 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 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:

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

FORT LAUDERDALE, FL 33309

2100 W. CYPRESS CREEK RD.

FORT LAUDERDALE, FL 33309

ABDO, JOHN E

Válerie C. Toalson, Vice President 4/22/08

954-940°500