

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000001231

FILED
Mar 16, 2006
Secretary of State

Entity Name: 1STPALM FINANCIAL SERVICES, LLC

Current Principal Place of Business:

6675 CORPORATE CENTER, PARKWAY.
SUITE 340
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

6675 CORPORATE CENTER PARKWAY
SUITE 340
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 59-3620999 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INTERSTATE REGISTERED AGENT CORPORATION
701 BRICKELL AVE., SUITE 3000
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: 1STPALM FINANCIAL, I, NC.
Address: 6675 CORPORATE CENTER PARKWAY SUITE 340
City-St-Zip: JACKSONVILLE, FL 32216

Title: MGRM () Delete
Name: MACKEY, ANN R
Address: 6675 CORPORATE CENTER PARKWAY SUITE 340
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ANN R. MACKEY

MS.

03/16/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date