

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L03000053119

FILED
Jul 08, 2009
Secretary of State**Entity Name:** PALMETTO PLAZA, LLC**Current Principal Place of Business:**8286 WESTERN WAY CIRCLE
SUITE C-2
JACKSONVILLE, FL 32256 US**New Principal Place of Business:****Current Mailing Address:**8286 WESTERN WAY CIRCLE
SUITE C-2
JACKSONVILLE, FL 32256 US**New Mailing Address:****FEI Number:** 90-0178657**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WIENER, WILLIAM CPA
8286 WESTERN WAY CIRCLE
SUITE C-2
JACKSONVILLE, FL 32256 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:** MGR () Delete
Name: KANNER, ROSE W MGR
Address: 1331 HERON POINT ROAD
City-St-Zip: JACKSONVILLE, FL 32223 US**Title:** MGR (X) Delete
Name: WIENER, WILLIAM MGR
Address: 8286 WESTERN WAY CIR #C-2
City-St-Zip: JACKSONVILLE, FL 32256 US**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 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: ROSE W. KANNER

MGR

07/08/2009

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