

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000012907

**FILED**  
**Jan 19, 2011**  
**Secretary of State**

**Entity Name:** 4735 PALM BEACH BLVD LLC

**Current Principal Place of Business:**

4735 PALM BEACH BLVD.  
FT. MYERS, FL 33905

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 50412  
FORT MYERS, FL 33994

**New Mailing Address:**

**FEI Number:** 22-3921397

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RYAN, MICHAEL  
4735 PALM BEACH BLVD  
FORT MYERS, FL 33905 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  
**Name:** RYAN, MICHAEL P  
**Address:** 4735 PALM BEACH BLVD.  
**City-St-Zip:** FT. MYERS, FL 33905

**Title:** MGR  
**Name:** ALBIN, DAVID R  
**Address:** 4735 PALM BEACH BLVD.  
**City-St-Zip:** FT. MYERS, FL 33905

**Title:** S  
**Name:** RYAN, MICHAEL P  
**Address:** 4735 PALM BEACH BLVD.  
**City-St-Zip:** FT. MYERS, FL 33905

**Title:** T  
**Name:** ALBIN, DAVID R  
**Address:** 4735 PALM BEACH BLVD.  
**City-St-Zip:** FT. MYERS, FL 33905

I hereby 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:** MICHAEL P. RYAN

MGR

01/19/2011

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