

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000001246

**FILED**  
**Mar 06, 2008**  
**Secretary of State**

**Entity Name:** PALM BAY JOAN LLC

**Current Principal Place of Business:**

3623 LATROBE DR., SUITE 214  
CHARLOTTE, NC 28211

**New Principal Place of Business:**

5501 77 CENTER DRIVE  
SUITE 200  
CHARLOTTE, NC 28217 US

**Current Mailing Address:**

3623 LATROBE DR., SUITE 214  
CHARLOTTE, NC 28211

**New Mailing Address:**

5501 77 CENTER DRIVE  
SUITE 200  
CHARLOTTE, NC 28217 US

FEI Number: 80-0032062

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SWEENEY, ROBERT  
3900 N. OCEAN BLVD, #1B  
GULFSTREAM, FL 33483 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: SWEENEY, JOAN M  
Address: 3623 LATROBE DR., SUITE 214  
City-St-Zip: CHARLOTTE, NC 28211

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: SWEENEY, JOAN M  
Address: 5501 77 CENTER DRIVE, SUITE 200  
City-St-Zip: CHARLOTTE, NC 28217 US

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: JOAN SWEENEY

MGR

03/06/2008

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