

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000022414

**Entity Name:** WEST FLORIDA GROUP II, LLC

**Current Principal Place of Business:**

913 GULF BREEZE PARKWAY  
41  
GULF BREEZE, FL 32561

**Current Mailing Address:**

913 GULF BREEZE PARKWAY  
41  
GULF BREEZE, FL 32561

**FEI Number:** 61-1676400

**Certificate of Status Desired:** No

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

PALMER, RAYMOND B  
913 GULF BREEZE PARKWAY  
41  
GULF BREEZE, FL 32561 US

*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

**Authorized Person(s) Detail :**

Title MGRM  
Name RAYMOND B. PALMER AS TRUSTEE  
OF THE PALMER FAMILY TRUST UTD  
12.21.2023  
Address 913 GULF BREEZE PARKWAY, #41  
City-State-Zip: GULF BREEZE FL 32561

Title MGRM  
Name CAROLYN A. PALMER AS TRUSTEE  
OF THE PALMER FAMILY TRUST UTD  
12.21.2023  
Address 913 GULF BREEZE PARKWAY, #41  
City-State-Zip: GULF BREEZE FL 32561

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** RAYMOND B. PALMER AS TRUSTEE

**MANAGER**

**03/18/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date