

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000039463

**Entity Name:** PALMS ONLY, LLC

**Current Principal Place of Business:**

5218 ROGERS AVE  
PORT ORANGE, FL 32127

**Current Mailing Address:**

P.O. BOX 4263  
ORMOND BEACH, FL 32175 US

**FEI Number:** 81-1628587

**Certificate of Status Desired:** Yes

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

LINTON, WILLIAM B  
5218 ROGERS AVE  
PORT ORANGE, FL 32127 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:** WILLIAM LINTON

01/28/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name LINTON, WILLIAM B  
Address 5218 ROGERS AVE  
City-State-Zip: PORT ORANGE FL 32127

*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:** WILLIAM LINTON

CHIEF

01/28/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date