

2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M0200000468

Entity Name: PALM COAST DATA LLC

Current Principal Place of Business:

11 COMMERCE BLVD.
PALM COAST, FL 32164

Current Mailing Address:

11 COMMERCE BLVD.
PALM COAST, FL 32164

FEI Number: 02-0543850

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH,LTD.,INC.
115 NORTH CALHOUN ST.
SUITE 4
TALLAHASSEE, FL 32301 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 VP, TREASURER
Name PIZZA, PETE
Address 300 ALEXANDER PARK
SUITE 204
City-State-Zip: PRINCETON NJ 08540

Title PRESIDENT, CEO
Name BURKE, RORY
Address 11 COMMERCE BLVD.
City-State-Zip: PALM COAST FL 32164

Title VP, SECRETARY
Name VITALE, CHRISTOPHER V
Address 300 ALEXANDER PARK
SUITE 204
City-State-Zip: PRINCETON NJ 08540

Title ASST. TREASURER
Name MARTIN, CLIFFORD
Address 300 ALEXANDER PARK
SUITE 204
City-State-Zip: PRINCETON NJ 08540

Title CONTROLLER, ASST. SECRETARY
Name GORDON, NEIL
Address 11 COMMERCE BLVD.
City-State-Zip: PALM COAST FL 32164

Title VP
Name MARTIN, BRIAN
Address 11 COMMERCE BLVD.
City-State-Zip: PALM COAST FL 32164

Title VP
Name BEAUDET, PETER
Address 11 COMMERCE BLVD.
City-State-Zip: PALM COAST FL 32164

Title VP
Name WRIGHT, PAUL
Address 11 COMMERCE BLVD.
City-State-Zip: PALM COAST FL 32164

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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: CLIFFORD MARTIN

ASST. TREASURER

03/08/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title VP
Name GARRISON, JILL
Address 11 COMMERCE BLVD.
City-State-Zip: PALM COAST FL 32164

Title VP
Name MACDONALD, KEITH
Address 11 COMMERCE BLVD.
City-State-Zip: PALM COAST FL 32164

Title VP
Name BRADLEY, JAMES
Address 11 COMMERCE BLVD.
City-State-Zip: PALM COAST FL 32164