2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L0000001375

1. Entity Name

PALM BEACH HOMEBUYERS, LLC



FILED Apr 10, 2008 08:00 Al Secretary of State

Principal Place of Business

528 N. FLORIDA AVE DELAND, FL 32720 Mailing Address

528 N. FLORIDA AVE DELAND, FL 32720



04072008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 65-1053623

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BUROZSKI, ROBERT P 528 N. FLORIDA AVE DELAND, FL 32720



8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Ragistered Agent signature required when rainsteting)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 U00000888830 04/22/08-80024-013 138.75

9.	MANAGING MEMBERS/MANAGERS	是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS BUROZSKI, ROBERT P 528 N. FLORIDA AVE DELAND, FL 32720	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT OLSON, LINDA K 528 N. FLORIDA AVE DELAND, FL 32720	
TITLE NAME STREET ADDRESS CITY-ST-ZiP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability prompany or the receiver or trustee embowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: NOW IN THE STATE OF THE STATE OF

ENTATIVE

Date

Daytime Phone #