

# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

05-05-2003 90696 029 \*\*\*\*\*50.00

**DOCUMENT # L00000016310**

1. Entity Name

**PALM BEACH CAPITAL MANAGEMENT, LLC**



Principal Place of Business

Mailing Address

11641 KEW GARDENS AVENUE, SUITE 101  
PALM BEACH GARDENS FL 33403

11641 KEW GARDENS AVENUE, SUITE 101  
PALM BEACH GARDENS FL 33403

2. Principal Place of Business

3601 PGA Blvd.

3. Mailing Address

3601 PGA Blvd.

Suite, Apt. #, etc.

301

Suite, Apt. #, etc.

301

City & State

Palm Beach Gardens, FL

City & State

Palm Beach Gardens, FL

Zip

33410

Country

Zip

33410

Country

4. FEI Number

65-1064796

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**HARROLD, DAVID W**  
11641 KEW GARDENS AVENUE, SUITE 101  
PALM BEACH GARDENS FL 33403

7. Name and Address of New Registered Agent

Name

Harrold, David W

Street Address (P.O. Box Number is Not Acceptable)

3601 PGA Blvd  
ste. 301

City

Palm Beach Gardens FL

Zip Code

33410

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: Registered Agent signature required when reinstating)

5-2-03

DATE

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**Due By May 1, 2003**

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM ☐ Delete  
NAME HARROLD, DAVID W  
STREET ADDRESS 11641 KEW GARDENS AVENUE, SUITE 101  
CITY-ST-ZIP PALM BEACH GARDENS FL 33403

TITLE MGRM ☐ Delete  
NAME PREVOST, BRUCE F  
STREET ADDRESS 11641 KEW GARDENS AVENUE, SUITE 101  
CITY-ST-ZIP PALM BEACH GARDENS FL 33403

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE MGRM ☒ Change ☐ Addition  
NAME Harrold, David W  
STREET ADDRESS 3601 PGA Blvd, ste 301  
CITY-ST-ZIP Palm Beach Gardens FL, 33410

TITLE MGRM ☒ Change ☐ Addition  
NAME Prevost, Bruce F  
STREET ADDRESS 3601 PGA Blvd, ste 301  
CITY-ST-ZIP Palm Beach Gardens, FL 33410

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 company, or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

5-2-03

Date

561-624-0594

Daytime Phone #

CR2F083 (10/02)

0027788