2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L01000007919

1. Entity Name

PALM TRAVEL VENTURES, L.C.

FILED
Apr 29, 2004 08:00 AM
Secretary of State

Principal Place of Business

POST OFFICE DRAWER 511447 C/O JACK O. HACKETT II, ESQ. PUNTA GORDA, FL 33951-1447 Mailing Address

POST OFFICE DRAWER 511447 C/O JACK O. HACKETT II, ESQ. PUNTA GORDA, FL 33951-1447



01062004 No Chg-LLC

CR2E083 (10/03)

-	FF
4.	FFI Number
•••	CITALINO
	A- 440000
	65-1108239
	UU-11U0ZJ3

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

941-639-9665

6. Name and Address of Current Registered Agent

SIGNATURE: PICKER D. PACKER

HACKETT, JACK O II ESQ. 99 NESBIT STREET PUNTA GORDA, FL 33950

DO NOT WRITE IN THIS SPACE

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)	DATE	
Filing Fee is \$50.00 Due by May 1, 2004				
9.	MANAGING MEMBERS/MANAGERS			
TITLE	MGR			
NAME	PALMER, RICHARD D			
STREET ADDRESS	2704 HIBISCUS COURT	U0000	0139599 -80126-025 50.00	
CITY-ST-ZIP	PUNTA GORDA, FL 33950		-80126-025 50.00	
TITLE				
NAME				
STREET ADDRESS				
CITY ST - ZIP				
TITLE				
NAME				
STREET ADDRESS		l DO NOT W	RITE	
TITLE		I IN THIS SE	PACE	
NAME STREET ADDRESS				
CITY-ST-ZIP				
TITLE				
NAME		1		
STREET ADDRESS				
CITY SI-ZIP				
TITLE				
NAME				
STREET ADDRESS				
CITY - ST - ZIP				
indicaled	on this report is the and accurate and that my signature sh	qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, all have the same legal effect as if made under oath; that I am a manageute this report as required by Chapter 608, Florida Statutes,	I further certify that the information jing member or manager of the	

JA

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