

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000013711

FILED
Apr 22, 2004
Secretary of State

Entity Name: PHOENIX PALM TREE COLLECTORS, LLC

Current Principal Place of Business:

505 S. FLAGLER DR., SUITE 1100
WEST PALM BEACH, FL 33401

New Principal Place of Business:

50 NORTH LAURA STREET
SUITE 3900
JACKSONVILLE, FL 32202

Current Mailing Address:

505 S. FLAGLER DR., SUITE 1100
WEST PALM BEACH, FL 33401

New Mailing Address:

POST OFFICE BOX 740702
BOYNTON BEACH, FL 33474

FEI Number: 65-1132981

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCRACKEN, JOHN B
505 S. FLAGLER DR., SUITE 1100
WEST PALM BEACH, FL 33401

Name and Address of New Registered Agent:

PAGE, FREDERICK D
50 NORTH LAURA STREET
SUITE 3900
JACKSONVILLE, FL 32202

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: FREDERICK D. PAGE

04/22/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: PORTER, TROY D
Address: 8140 93RD LANE SOUTH
City-St-Zip: BOYNTON BEACH, FL 33437

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PORTER, TROY D
Address: 5157 ARBOR GLEN CIRCLE
City-St-Zip: LAKE WORTH, FL 33463

I hereby certify that the information supplied with this filing does not qualify for the 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 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 608, Florida Statutes.

SIGNATURE: TROY D. PORTER

MGR

04/22/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date