

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000013711

**FILED**  
**Apr 15, 2005**  
**Secretary of State**

**Entity Name:** PHOENIX PALM TREE COLLECTORS, LLC

**Current Principal Place of Business:**

50 NORTH LAURA STREET  
SUITE 3900  
JACKSONVILLE, FL 32202

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 740702  
BOYNTON BEACH, FL 33474

**New Mailing Address:**

**FEI Number:** 65-1132981

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

HOLLAND & KNIGHT, LLP  
701 BRICKELL AVENUE  
SUITE 3000  
MIAMI, FL 331313209 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: JAMES L. MAIN

04/15/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

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

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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

04/15/2005

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