

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90421 027 ****50.00

DOCUMENT # L01000017678					
1. Entity Name PALM COAST FOREST, LLC					
Principal Place of Business ONE CORPORATE DR., STE. 3A PALM COAST, FL 32137-4715			Mailing Address 4315 METRO PKWY STE 500 FORT MYERS, FL 33916		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		02202006 Chg-LLC CR2E083 (11/05)	
4. FEI Number 65-1149597				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent NATIELLO, JOHN A 4315 METRO PARKWAY SUITE 500 FORT MYERS, FL 33916			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2006.			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LIVINGSTON, WILLIAM I ONE CORPORATE DR., STE. 3A PALM COAST, FL 321374715	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SMITH, CLINTON F III ONE CORPORATE DR., SUITE 3A PALM COAST, FL 321374715	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR NATIELLO, JOHN A 4315 METRO PKWY STE 500 FORT MYERS, FL 33916	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LUSBY, DAVID 1 CORPORATE DR STE 3A PALM COAST, FL 32137	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LINEHAN, EILEEN ONE CORPORATE DR., SUITE 3A PALM COAST, FL 321374715	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ALLETE PROPERTIES, INC. ONE CORPORATE DR., SUITE 3A PALM COAST, FL 32137	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: JOHN NATIELLO			2/23/06		239-333-3300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date		Daytime Phone #

20010722



CONTINUED.....

ATTACHMENT

20010722

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # L01000017678 Continued

PALM COAST FOREST, LLC

Line 9 Continued

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

Line 10 Continued

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

MGR ☐ Change ☒ Addition
JOHANNESMEYER, JOHN C. JR
4315 METRO PARKWAY, SUITE 500
FORT MYERS, FL 33916

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

MGR ☐ Change ☒ Addition
HORVATH, MARGARET
4315 METRO PARKWAY, SUITE 500
FORT MYERS, FL 33916

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

MGR ☐ Change ☒ Addition
HOLQUIST, LAURA A.
4315 METRO PARKWAY, SUITE 500
FORT MYERS, FL 33916