

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # L02000007543 1. Entity Name PALMETTO COURT, LLC	
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Principal Place of Business 9191 R. G. SKINNER PARKWAY SUITE 501 JACKSONVILLE, FL 32256 US	Mailing Address 9191 R. G. SKINNER PARKWAY SUITE 501 JACKSONVILLE, FL 32256 US
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DO NOT WRITE IN THIS SPACE



04302008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 03-0506949	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent MURPHY, DANIEL R 9191 R. G. SKINNER PARKWAY SUITE 501 JACKSONVILLE, FL 32256
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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 _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MURPHY, DANIEL R 9191 R. G. SKINNER PARKWAY SUITE 501 JACKSONVILLE, FL 32256
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GUNTER, TRENT M 9191 R. G. SKINNER PARKWAY SUITE 501 JACKSONVILLE, FL 32256
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KOEHLER, DAVID C 9191 R. G. SKINNER PARKWAY SUITE 501 JACKSONVILLE, FL 32256
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KUEHN, STEPHEN E 9191 R. G. SKINNER PARKWAY SUITE 501 JACKSONVILLE, FL 32256
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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05/27/08-80088-011 138.75

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IN THIS SPACE**

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: DANIEL R Murphy 4/30/08 904 363-2010
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #