


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 08, 2008 8:00 am
Secretary of State

05-08-2008 90108 001 ***300.00

DOCUMENT # L02000018051 1. Entity Name MAIN STREET PALM BEACH, LLC					
Principal Place of Business 324 ROYAL PALM WAY, SUITE 204 PALM BEACH, FL 33480			Mailing Address 324 ROYAL PALM WAY, SUITE 204 PALM BEACH, FL 33480		
2. Principal Place of Business - No P.O. Box, # 5801 S. Dixie Hwy Suite, Apt. #, etc. Suite B		3. Mailing Address 5801 S. Dixie Highway Suite, Apt. #, etc. Suite B			
City & State West Palm Beach		City & State West Palm Beach			
Zip 33405		Country USA		Zip 33405	
Country USA		Country USA			
6. Name and Address of Current Registered Agent VEGOSEN, DEAN ESQ. NORTH BRIDGE TOWER I, 18TH FLOOR 515 NORTH FLAGLER DRIVE WEST PALM BEACH, FL 33480			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$538.75 Due by September 12, 2008		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CURY, ED 324 ROYAL PALM WAY #204 PALM BEACH, FL 33480 <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	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<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	<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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					
				Date _____ Daytime Phone # _____	

30005971



05052008 Chg-LLC CR2E083 (12/06)

4. FEI Number
41-2051246

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

FL Zip Code



ATTACHMENT
30005971

THE CURY GROUP
Development. Construction. Design.

May 1, 2008

Florida Department of State
Division of Corporation
P.O. Box 6478
Tallahassee, FL 32314

Reference: 2008 Annual Report: Main Street Palm Beach LLC

L02000018051

2008 Annual Report: 313 Dunbar, LLC

L02000014360

The enclosed reports and fees for \$150 for each entity are being submitted slightly after the May 1, 2008 filing date due to a change in our mailing address. Unfortunately, the notice was not received by the responsible office staff in order to file sooner.

We appreciate your cooperation.

Ed Cury, Manager