2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED Mar 23, 2007 08:00 A Secretary of State DOCUMENT # L02000024761 1. Entity Namé PALMETTO PINE DEVELOPMENT, LLC Principal Place of Business Mailing Address 1326 CAPE CORAL PKWY E 1326 CAPE CORAL PKWY E CAPE CORAL, FL 33904 CAPE CORAL, FL 33904 02262007 No Cha-LLC CR2E083 (11/05) WRITE IN THIS SPACE Applied For 4. FEI Number 02-0625000 Not Applicable \$5,00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KOSZULINKSI, GEORG W DO NOT WRITE 839 SW 48 TERR STE 206 CAPE CORAL, FL 33914 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 tale if applicable (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee Is \$50.00 Due by May 1, 2007 9. MANAGING MEMBERS/MANAGERS MGRM TATLE KOSZULINSKI, GEORG W NAME STREET ADDRESS 839 SW 48 TERR STE 206 CITY-ST-ZIP CAPE CORAL, FL 33914 U00000675804 TITLE STREET ADDRESS CITY - ST- ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY - ST - ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CRY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied indicated on this report is true and accurate ed with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information to end that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the fyliate empowered to execute this report as required by Chapter 608, Florida Statutes. timited liability company or the re

Daytime Phone #