


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 20, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000033180 1. Entity Name LADY PALM, LLC	
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Principal Place of Business 4225 N COUNTY RD GULF STREAM, FL 33483 US	Mailing Address 4225 N COUNTY RD GULF STREAM, FL 33483 US
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DO NOT WRITE IN THIS SPACE



01062008 No Chg-LLC CR2E083 (11/05)

4. FEI Number 02-0656835	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

DE LAVILLE, STEFANI A
 4225 N COUNTY RD
 GULF STREAM, FL 33483

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)

Filing Fee is \$50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DE LAVILLE, STEFANI A 4225 N COUNTY RD GULF STREAM, FL 33483
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01/25/06 80001-021 55.00

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: Stefani A. de Lerville 1/15/06 (361) 274-4040
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

Stefani A. de Lerville