2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2006
Secretary of State

DOCUMENT# L03000003725

Entity Name: MASTER PALMS, LLC

Current Principal Place of Business:

22119 ELMIRA BOULEVARD
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

Current Mailing Address:

PO BOX 494911
PORT CHARLOTTE, FL 339494911

New Mailing Address:

FEI Number: 65-0741418 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BEASON, BRIAN M
18501 MURDOCK CIRCLE 6TH FL
PORT CHARLOTTE, FL 33948 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: P ( ) Delete
Name: PAULSEN, LANCE
Address: 4551 GRASSY POINT BLVD
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: VP ( ) Delete
Name: CAMMICK, STEPHEN P
Address: 22119 ELMIRA BLVD
City-St-Zip: PORT CHARLOTTE, FL 33952

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: STEPHEN CAMMICK VP 05/02/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date