

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000027520

Entity Name: D & G PALMS, LLC

FILED  
Feb 14, 2005  
Secretary of State

**Current Principal Place of Business:**

C/O SAWGRASS FORD ATT: DAVID MENTEN  
14501 WEST SUNRISE BOULEVARD  
SUNRISE, FL 33323

**New Principal Place of Business:**

**Current Mailing Address:**

C/O SAWGRASS FORD ATT: DAVID MENTEN  
14501 WEST SUNRISE BOULEVARD  
SUNRISE, FL 33323

**New Mailing Address:**

FEI Number: 58-9240007

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PORTLEY, PETER A  
2211 EAST SAMPLE ROAD STE.204  
LIGHTHOUSE POINT, FL 33064 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: GRAHAM, MICHEAL G  
Address: 415 SE 30TH DRIVE  
City-St-Zip: HOMESTEAD, FL 33033

Title: MGRM ( ) Delete  
Name: MENTEN, DAVID M  
Address: 14501 W SUNRISE BLVD  
City-St-Zip: SUNRISE, FL 33323

**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 Section 119.07(3)(i), 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: DAVID MENTEN

MGRM

02/14/2005

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