## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000039129

Entity Name: PALM HEALTHGROUP LLC

FILED Aug 28, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1055 POMPEI LANE 25 6TH ST. NORTH NAPLES, FL 34103 NAPLES, FL 34102

**Current Mailing Address: New Mailing Address:** 

1055 POMPEI LANE NAPLES, FL 34103

FEI Number: 41-2112356 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

FRANKLIN-PRESCOTT, JENNIFER FRANKLIN-PRESCOTT, JENNIFER 1055 POMPEI LANE 25 6TH ST. NORTH, NAPLES, FL 34103 NAPLES, FL 34102

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: 08/28/2004

> Electronic Signature of Registered Agent Date

## **MANAGING MEMBERS/MEMBERS:** ADDITIONS/CHANGES:

( ) Delete ( ) Change (X) Addition FRANKLIN-PRESCOTT, JENNIFER A MGR Name: Name:

Address: Address: 25 6TH. ST. NORTH City-St-Zip: City-St-Zip: NAPLES, FL 34102

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 Statutés. 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: JENNIFER FRANKLIN-PRESCOTT 08/28/2004