## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L03000049742

1. Entity Name

PALM BEACH CAPITAL CONSULTANTS LLC



FILED Apr 23, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

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

100 HARBOR WAY

HOBE SOUND, FL 33455 US

100 HARBOR WAY HOBE SOUND, FL 33455 US

04072008 No Chg-LLC

CR2E083 (12/07)

Daytime Ptione #

6. Name and Address of Current Registered Agent

WHWW, INC 390 N ORANGE AVE SUITE 1500 ORLANDO, FL 32801

SIGNATURE:

DO NOT WRITE III

	named entity submits this statement for the purpose of chan	ging its registered office or registered agent, or both, in the S	
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable	(NOTE. Registered Agen) signature required when reinstating)	DATE
	NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS		Sistema di neobele di i
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GELMAN, JEFFREY 100 HARBOR WAY HOBE SOUND, FL 33455		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			0000091\$803 2/08-80002-023 138:75 2/14/14/14/14
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NO	TWRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS	SSPACE
TITLE NAME STREET ADDRESS CITY- ST-ZIP			
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP			
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 receiverpor trustee empowered to execute this report as required by Chapter 608. Florida Statutes.			