



2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 26, 2007 08:00 A
Secretary of State

DOCUMENT # L04000005517 1. Entity Name PALIO RANCH, LLC	
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Principal Place of Business 432 S. BABCOCK STREET MELBOURNE, FL 32901	Mailing Address 432 S. BABCOCK STREET MELBOURNE, FL 32901
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DO NOT WRITE IN THIS SPACE



02062007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-0653845	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

**DEAN MEAD SERVICES LLC
800 N. MAGNOLIA AVE.
SUITE 1500
ORLANDO, FL 32803**

**DO NOT WRITE
IN THIS SPACE**

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

**Filing Fee is \$50.00
Due by May 1, 2007**

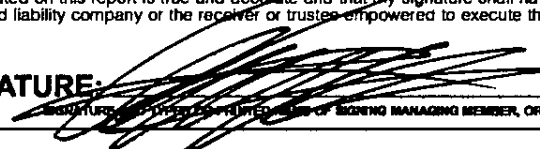
03/07/07-80036-022 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR PEZZEMINTI, ALEXANDER 432 S BABCOCK ST MELBOURNE, FL 32901
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM PEZZEMINTI, JR, JERRY J 432 S BABCOCK ST MELBOURNE, FL 32901
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM LEICHTENBERG, ROBERT L 432 S BABCOCK ST MELBOURNE, FL 32901
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 606, Florida Statutes.

SIGNATURE:  **ALEXANDER PEZZEMINTI** **2/16/07** **321-722-5033**

SIGNATURE OF THE REGISTERED AGENT, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #