

2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

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

DOCUMENT # L04000030669

1. Entity Name
PALM PROPERTIES HOLDINGS, LLC



Principal Place of Business
**2724 N.E. 14TH STREET
FT. LAUDERDALE, FL 33304 US**

Mailing Address
**9 JOANNA WAY
KINNELON, NJ 07405 US**



02102007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
90-0161593

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SHELDON, KAWUT
2427 NE 14TH STREET
FT. LAUDERDALE, FL 33304**

**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 restate.)

DATE _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
DECHANT, EDWARD
412 EAST SHORE TRAIL
SPARTA, NJ 07870**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
MANCINI, JAMES
9 JOANNA WAY
KINNELON, NJ 07405**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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03/07/07-80043-004 55.00

**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 608, Florida Statutes.

SIGNATURE: _____

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

2-10-07

Date

973-492-1209

Daytime Phone #