

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000034598

FILED  
Jul 05, 2006  
Secretary of State

Entity Name: PALMETTO HOME & LAND LLC

## Current Principal Place of Business:

1380 HOMESTEAD RD.  
LEHIGH ACRES, FL 33936

## New Principal Place of Business:

## Current Mailing Address:

1380 HOMESTEAD RD.  
LEHIGH ACRES, FL 33936

## New Mailing Address:

FEI Number: 56-2457776      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

## Name and Address of New Registered Agent:

CONTI, STEVE  
1726 ENGLEWOOD AVE  
LEHIGH ACRES, FL 33972      US

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/MANAGERS:

Title: MGRM ( ) Delete  
Name: CONTI, STEVE  
Address: 1726 ENGLEWOOD AVE  
City-St-Zip: LEHIGH ACRES, FL 33972

Title: MGRM ( ) Delete  
Name: CONTO, BARBARA  
Address: 1726 ENGLEWOOD AVE  
City-St-Zip: LEHIGH ACRES, FL 33972

Title: MGR ( ) Delete  
Name: COSGRAVE, THERESE  
Address: 124 RITCH AVE. B-PH2  
City-St-Zip: GREENWICH, CT 06830

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: CONTI, BARBARA  
Address: 1726 ENGLEWOOD AVE  
City-St-Zip: LEHIGH ACRES, FL 33972

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 Chapter 119, 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: STEVE CONTI

MGRM

07/05/2006

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