## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000039441

1. Entity Name PALMVIEW, LLC



FILED Apr 11, 2008 08:00 Al Secretary of State

Principal Place of Business 6201 CORTEZ ROAD BRADENTON, FL 34210 Mailing Address

6201 CORTEZ ROAD BRADENTON, FL 34210



DO NOT WRITE IN THIS SPACE

03122008 No Chg-LLC CR2E083 (12/07)

4. FEI Number		Applied For
20-1169270		Not Applicable
5. Certificate of Status Desired	\$5.00 Additional	

6. Name and Address of Current Registered Agent

BARNES, GARRET T ESQ C/O BARNES WALKER CHARTERED 33119 MANATEE AVENUE WEST BRADENTON, FL 34205

## DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the purpose of chanions of registered agent.	ging its registered office or registered agent, or both, in	the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and little II applicable	(NOTE Registered Agent signature required when reinstating)	DATE
	NOW!!! FEE IS \$138.75 71, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS	MGR ODEN, JANET M 6201 CORTEZ ROAD	İ	
CITY-ST-ZIP	BRADENTON, FL 34210		
TITLE	MGR		Nananne91552
NAME STREET ADDRESS	MCLAUGHLIN, JEFF 6201 CORTEZ ROAD	0.	4/23/08-80030-002 150.00
CITY-ST-ZIP	BRADENTON, FL 34210		#/ ZS/ 03=30030=00Z 130.00
TITLE			
NAME STREET ADDRESS			
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TITLE		IN T	HIS SPACE
NAME		114 11	IIO OFACE
STREET ADDRESS		İ	
CITY-ST-ZIP			
TITLE NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			

11. I hereby certify that the information supplied with this fling 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 true empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

CITY-ST-ZIP

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

04-04-08

11-17/ 00