

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000047008

1. Entity Name

MAIN STREET MARKETING OF PALM BEACH, LLC



Principal Place of Business

**630 MAPLEWOOD DRIVE
100
JUPITER FL 33458**

Mailing Address

**630 MAPLEWOOD DRIVE
100
JUPITER FL 33458**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E083 (10/05)

4. FEI Number

20-1289385

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TAYLOR, WILLIAM E
630 MAPLEWOOD DRIVE
100
JUPITER FL 33458**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 registering)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2006

9. MANAGING MEMBERS/MANAGERS

10.

ADDITIONS/CHANGES

TITLE ☐ Delete
NAME **MGRM**
STREET ADDRESS **SOLOMON, J C II**
CITY- ST- ZIP **630 MAPLEWOOD DRIVE #100**
JUPITER FL 33458

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Change ☐ Add

TITLE ☐ Delete
NAME **MGRM**
STREET ADDRESS **GRAZIOTTO, RAYMOND E**
CITY- ST- ZIP **19651 N RIVERSIDE DR**
TEQUESTA FL 33469

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Change ☐ Add

TITLE ☐ Delete
NAME **MGRM**
STREET ADDRESS **CANTWELL, CHRISTOPHER M**
CITY- ST- ZIP **630 MAPLEWOOD DRIVE, #100**
JUPITER FL 33458

TITLE
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CITY- ST- ZIP

☐ Change ☐ Add

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: William E. Taylor *William E. Taylor CFO*

4-9-2006

561-625-5442