

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000048820

**FILED**  
**Mar 10, 2011**  
**Secretary of State**

**Entity Name:** CORAL PALMS PROFESSIONAL, LLC

**Current Principal Place of Business:**

1708 BEACH PARKWAY  
202  
CAPE CORAL, FL 33904 US

**New Principal Place of Business:**

**Current Mailing Address:**

1708 BEACH PARKWAY  
202  
CAPE CORAL, FL 33904 US

**New Mailing Address:**

**FEI Number:** 20-1307575      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCHUTT, DARRIN R ESQ.  
1322 SE 46 LANE  
202  
CAPE CORAL, FL 33904 US

**Name and Address of New Registered Agent:**

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  
**Name:** POWELL, BILL M  
**Address:** 1708 BEACH PARKWAY #202  
**City-St-Zip:** CAPE CORAL, FL 33904 US

**Title:** MGRM  
**Name:** POWELL, MARJORIE  
**Address:** 1708 BEACH PARKWAY # 202  
**City-St-Zip:** CAPE CORAL, FL 33904 US

**Title:** MGRM  
**Name:** HERTZ, SCOTT  
**Address:** 403 SW 49 LN  
**City-St-Zip:** CAPE CORAL, FL 33914

I hereby 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: MARJORIE POWELL

MGRM

03/10/2011

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