

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000061468

Entity Name: PALM CITY BEACH, LLC

FILED  
Apr 30, 2008  
Secretary of State

## Current Principal Place of Business:

3953 SOUTHWEST BRUNER TERRACE  
PALM CITY, FL 34990 US

## New Principal Place of Business:

2300 SW POMA DRIVE  
PALM CITY, FL 34990 US

## Current Mailing Address:

3953 SOUTHWEST BRUNER TERRACE  
PALM CITY, FL 34990 US

## New Mailing Address:

2300 SW POMA DRIVE  
PALM CITY, FL 34990 US

FEI Number: 61-1474792

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

DVORAK, THOMAS W  
2055 SOUTH KANNER HIGHWAY  
STUART, FL 34994 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 ( ) Delete  
Name: SNOW, GLEN R  
Address: 5070 SW BLUESKY LN  
City-St-Zip: PALM CITY, FL 34990

Title: MGRM ( ) Delete  
Name: SNOW, DARCY  
Address: 5070 SW BLUESKY LN  
City-St-Zip: PALM CITY, FL 34990

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: SNOW, GLEN R  
Address: 5070 SW BLUE SKY LN  
City-St-Zip: PALM CITY, FL 34990

Title: MGRM (X) Change ( ) Addition  
Name: SNOW, DARCY  
Address: 5070 SW BLUE SKY LN  
City-St-Zip: PALM CITY, FL 34990

I hereby certify that the information supplied with this filing does not qualify 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: GLEN SNOW

MR.

04/30/2008

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