


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 22, 2005 8:00 am
Secretary of State

05-05-2005 90022 043 ****50.00

DOCUMENT # L04000064439
 1. Entity Name
SOUTHERN PALM PROPERTIES, LLC



Principal Place of Business
**553 QUAIL CREST COURT
 DEBARY, FL 32713**

Mailing Address
**553 QUAIL CREST COURT
 DEBARY, FL 32713**

30010433



2. Principal Place of Business
553 QUAIL CREST Ct

3. Mailing Address
STATE

Suite, Apt. #, etc.

04282005 Chg-LLC CR2E083 (10/03)

City & State
DEBARY FL.

City & State

4. FEI Number
20-1981607

Applied For
 Not Applicable

Zip
32713

Country
USA

Zip Country

5. Certificate of Status Desired **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent
**MARETSKY, KEITH
 553 QUAIL CREST COURT
 DEBARY, FL 32713**

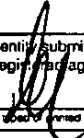
7. Name and Address of New Registered Agent

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  **Keith Maretsky** **4/30/05**
Signature of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reappointing) DATE

**Filing Fee is \$50.00
 Due by May 1, 2005**

**Make check payable to
 Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
OWNER/MANAGER	KEITH MARETSKY	553 QUAIL CREST COURT	DEBARY, FL 32713	<input type="checkbox"/>
OWNER	DAVID MARETSKY	20 LEESIDE DR.	GREAT RIVER NY 11739	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

10. ADDITIONS/CHANGES

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:  **Keith Maretsky** **4/30/05**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #