2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000065879

1. Entity Name CORRADI PALM BEACH BLVD, LLC



FILED Apr 19, 2007 08:00 A Secretary of State

Principal Place of Business

740 WEST ST NAPLES, FL 34108 Mailing Address

740 WEST ST NAPLES, FL 34108



DO NOT WRITE IN THIS SPACE

04122007 No Chg-LLC CR2E083 (11/05)

4.	FEI Number 20-1621338	F	Applied For Not Applicable
5.	Certificate of Status Desired	\$5.00	O Additional

Daytime Phone #

6. Name and Address of Current Registered Agent

CORRADI, MICHAEL K 740 WEST ST NAPLES, FL 34108

DO NOT WRITE IN THIS SPACE

		IN THIS STAGE					
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		. Registered Agent signature required when reinstating) DATE					
FI D	iling Fee is \$50.00						
9.	MANAGING MEMBERS/MANAGERS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CORRADI, MICHAEL K 740 WEST ST NAPLES, FL 34108						
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE					
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		U00000716091 04/29/07-80002-012 50.00					
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
11. I hereby of indicated	certify that the information supplied with this filing does not qualify to on this report is true and accurate and that my signature shall have	or the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information 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:		VIN	had	K	Conal	4-16	-2007	7
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPORSENTATIVE								