

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Mar 08, 2006 8:00 am
Secretary of State

03-08-2006 90045 015 *****50.00

DOCUMENT # L04000081964

1. Entity Name

PALM COAST 4, L.L.C.



Principal Place of Business

100 EXECUTIVE WAY, SUITE 108
PONTE VEDRA FL 32082

Mailing Address

100 EXECUTIVE WAY, SUITE 108
PONTE VEDRA FL 32082

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite 206

Suite, Apt. #, etc.

Suite 206

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E083 (10/05)

4. FEI Number

20-1888539

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

DAVENPORT, GARY B.
4 OLD KINGS ROAD NORTH, SUITE B
PALM COAST FL 32137

Name

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

5003 John Anderson Highway

City

Flagler Beach

FL

Zip Code

32136

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 reinstating)

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
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
VERGNOLLE, ROBERT, R., SR., TRUSTEE
100 EXECUTIVE WAY, SUITE 108
PONTE VEDRA FL 32082 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
SUITE 206

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
VERGNOLLE, ROBERT R JR.
100 EXECUTIVE WAY, SUITE 108
PONTE VEDRA FL 32082 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
SUITE 206

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
VERGNOLLE, RONALD B
100 EXECUTIVE WAY, SUITE 108
PONTE VEDRA FL 32082 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
SUITE 206

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
CRAWFORD, G. ALEXANDER
100 EXECUTIVE WAY, SUITE 108
PONTE VEDRA FL 32082 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
SUITE 206

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☒ Addition
*MEMBER MGRM
Charles McKissich
100 Executive Way Suite 206
Ponte Vedra FL 32082*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

2/20/06

904-273-5419