2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000085608

1. Entity Name

STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PALM COAST INVESTMENT ONE, LLC



FILED Apr 02, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

3755 7TH TERRACE, SUITE 101 VERO BEACH, FL 32960 3755 7TH TERRACE, SUITE 101 VERO BEACH, FL 32960



02222007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number		Applied For
20-2398925		Not Applicable
5. Certificate of Status Desired	K	\$5.00 Additional

a. Certificate of S

Fee Required

HUDSON, DOROTHY A 3755 7TH TERRACE, SUITE 101 VERO BEACH, FL 32960

DO NOT WRITE

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 agers and title if applicable	(NOTE: Registered Agent signature required when rentating) DATE	
	iing Fee is \$50.00 ue by May 1, 2007	U00000688212 04/10/07-80071-004 55.00	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGRM MCNALLY, ROBERT C 3755 7TH TERRACE, SUITE 101 VERO BEACH, FL 32960	The second secon	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			·
TITLE NAME STREET ADDRESS CITY-ST-ZIP			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE	
TITLE			

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 it made under oath; that I am a managing member or manager of the limited tiability company or the received or trustee employed to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DOP PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRES

Robert Me Walli

3/29/07

772-794-9105

Oate

Daytime Phone #