

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000088241

FILED
Apr 11, 2006
Secretary of State

Entity Name: PALM PROPERTY INVESTMENTS LLC

Current Principal Place of Business:

2159 TURNBERRY DRIVE
OVIEDO, FL 32765 US

New Principal Place of Business:

667 RED WING DR.
LAKE MARY, FL 32746 US

Current Mailing Address:

2159 TURNBERRY DRIVE
OVIEDO, FL 32765 US

New Mailing Address:

667 RED WING DR.
LAKE MARY, FL 32746 US

FEI Number: 20-1974272

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RANSOM, TAMARA
2159 TURNBERRY DRIVE
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

RANSOM, TAMARA
667 RED WING DR.
LAKE MARY, FL 32746 US

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: TAMARA RANSOM

04/11/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RANSOM, KIM
Address: 2159 TURNBERRY DRIVE
City-St-Zip: OVIEDO, FL 32765 US

Title: MGRM () Delete
Name: RANSOM, TAMARA
Address: 2159 TURNBERRY DRIVE
City-St-Zip: OVIEDO, FL 32765 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: RANSOM, KIM
Address: 667 RED WING DR.
City-St-Zip: LAKE MARY, FL 32746 US

Title: MGRM (X) Change () Addition
Name: RANSOM, TAMARA
Address: 667 RED WING DR.
City-St-Zip: LAKE MARY, FL 32746 US

I hereby certify that the information supplied with this filing does not qualify for the 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: TAMARA RANSOM

MGRM

04/11/2006

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