2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE: YOUT - YOUTH SHORT - LOUTH SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Jul 16, 2007 8:00 am Secretary of State DOCUMENT # L05000015061 1. Entity Name 04-27-2007 90042 006 ****50 00 PALMERSTON LLC Principal Place of Business Mailing Address 5200 VINELAND ROAD 5200 VINELAND ROAD SUITE 100 SUITE 100 ORLANDO, FL 32811 ORLANDO, FL 32811 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 165 W. SR 434 165 W. SR 434 Suite, Apt. #, etc. Suite, Apt. #, etc. 04242007 Chg-LLC CR2E083 (12/06) City & State City & State 4. FEI Number Applied For Winter Springs, FL Winter Springs, FL 61-1493052 Not Applicable Zip 32708 Country Country Zip 32708 \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SHARMA, RAKESH SHARMA, RAKESH Street Address (P.O. Box Number is Not Acceptable) 5200 VINELAND ROAD SUITE 100 165 W. SR 434 ORLANDO, FL 32811 City WINTER SPRINGS Zip Code 32708 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. — M4me (NOTE: Registered Agent signature required when reinstating) 07 いい07 Filing Fee is \$50.00 Make check payable to Due by May 1, 2007 Florida Department of State MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES MGR TITLE TITLE ☐ Delete MGRM X Change ☐ Addition NAME SHARMA, RAKESH NAME SHARMA, RAKESH STREET ADDRESS 5200 VINELAND ROAD 165 W. SR 434 STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32811 CITY-ST-ZIP WINTER SPRINGS, FL 32708 TITLE ☐ Delete TITLE X Addition Change MGR NAME NAME SHARMA, DEEPAK STREET ADDRESS STREET ADDRESS 3 PALMERSTON AVENUE CITY-ST-7IP CITY-ST-ZIP SLOUGH, BERKSHIRE, UKSL 37PU TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE □ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. Thereby 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 trueland accurate and that my signature shall have the same legal effect as if made under outby that I am a managing member or manager of the indicated on this report is training limited liability company or it 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

FILED

ATTACHMENT



OFFICE ADDRESS 165 West S.R. 434 Winter Springs, FL 32708-2547

P.O. Box 197043 Winter Springs, FL 32719-7043

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July 12, 2007

Division of Corporations P.O. Box 6478 Tallahassee, FL 32314

I have attached the 2007 Annual Report for Palmerston, LLC I submitted it previously, but it was returned to me for correction. I have corrected the change of address portion (sections 2 and 3) and corrected the titles of the LLC members in Section 9. My check for payment was sent with the original document and you have already processed the check.

Please accept this corrected and form and file my 2007 Annual Report.

Rakesh Sharma Managing Member