## 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L05000021301

**Current Principal Place of Business:** 

Entity Name: PALM SPRINGS HOLDINGS, LLC

FILED Dec 11, 2007 Secretary of State

**New Principal Place of Business:** 

1164 SW WHISPER RIDGE TRAIL 4609 HUNTING TRAIL PALM CITY, FL 34990 LAKE WORTH, FL 33467 **Current Mailing Address: New Mailing Address:** 1164 SW WHISPER RIDGE TRAIL 4609 HUNTING TRAIL PALM CITY, FL 34990 LAKE WORTH, FL 33467 US FEI Number: 20-2591985 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BOWIE, ROBERT S MCDEAVITT, DAVID P 1164 SW WHISPER RIDGE TRAIL 4609 HUNTING TRAIL PALM CITY, FL 34990 LAKE WORTH, FL 33467 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: DAVID P.MCDEAVITT 12/11/2007

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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Title:	MGRM () Delete	Title:	PRES (X) Change ( ) Addition
Name:	BOWIE, ROBERT S	Name:	HOGUE, JEFFREY M
Address:	1164 SW WHISPER RIDGE TR	Address:	1556 STONEHAVEN DRIVE
City-St-Zip:	PALM CITY, FL 34990	City-St-Zip:	WEST PALMBEACH, FL 33411 US
Title:	()Delete	Title:	DIR ( ) Change (X) Addition
Name:		Name:	BATES, A. ONEAL
Address:		Address:	6900 DWIGHT ROAD
City-St-Zip:		City-St-Zip:	WEST PALMBEACH, FL 33411 US
Title:	( ) Delete	Title:	DIR () Change (X) Addition
Name:		Name:	MCDEAVITT, DAVID P
Address:		Address:	4609 HUNTING TRAIL
City-St-Zip:		City-St-Zip:	LAKE WORTH, FL 33467 US
Title:	( ) Delete	Title:	DIR () Change (X) Addition
Name:		Name:	HOGUE, ELAINE G
Address:		Address:	1556 STONEHAVEN DRIVE
City-St-Zip:		City-St-Zip:	WEST PALM BEACH, FL 33411 US
Title:	()Delete	Title:	DIR () Change (X) Addition
Name:		Name:	MCDEAVITT, JENNIFER L
Address:		Address:	4609 HUNTING TRAIL
City-St-Zip:		City-St-Zip:	LAKE WORTH, FL 33467 US

I hereby certify that the information supplied with this filing does not qualify 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: DAVID P.MCDEAVITT DIR 12/11/2007