

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000035052

Entity Name: GREEN TURTLE, L.L.C.

FILED
Mar 05, 2007
Secretary of State

Current Principal Place of Business:

1520 LAMBERT AVENUE
FLAGLER BEACH, FL 32136

New Principal Place of Business:

5 UTILITY DRIVE
SUITE 14
PALM COAST, FL 32137

Current Mailing Address:

1520 LAMBERT AVENUE
FLAGLER BEACH, FL 32136

New Mailing Address:

5 UTILITY DRIVE
SUITE 14
PALM COAST, FL 32137

FEI Number: 20-2709440

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIUMENTO, MICHAEL D
4 OLD KINGS ROAD NORTH, SUITE B
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CHIUMENTO, MICHAEL D
Address: 4 OLD KINGS ROAD NORTH, SUITE B
City-St-Zip: PALM COAST, FL 32137

Title: MGRM () Delete
Name: PAGE, BRUCE E
Address: 1520 LAMBERT AVENUE
City-St-Zip: FLAGLER BEACH, FL 32136

Title: MGRM () Delete
Name: CREWS, C. SCOTT
Address: P.O. BOX 69
City-St-Zip: BUNNELL, FL 32110

Title: MGRM () Delete
Name: PREVATTE, EDWIN E
Address: 1660 LAMBERT AVENUE
City-St-Zip: FLAGLER BEACH, FL 32136

Title: MGRM () Delete
Name: KEYES, JERRY
Address: 5 UTILITY DRIVE, SUITE 14
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JERRY KEYES

MGRM

03/05/2007

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