

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000035052

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

FILED  
Jan 30, 2008  
Secretary of State

**Current Principal Place of Business:**

5 UTILITY DRIVE  
SUITE 14  
PALM COAST, FL 32137

**New Principal Place of Business:**

**Current Mailing Address:**

5 UTILITY DRIVE  
SUITE 14  
PALM COAST, FL 32137

**New Mailing Address:**

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 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: GERALD P. KEYES

MGRM

01/30/2008

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