

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000062464

FILED  
Apr 03, 2009  
Secretary of State

Entity Name: POINT OF PALMS, LLC

## Current Principal Place of Business:

1521 SOUTH TAMiami TRAIL, SUITE 303  
VENICE, FL 34285

## New Principal Place of Business:

## Current Mailing Address:

1521 SOUTH TAMiami TRAIL, SUITE 303  
VENICE, FL 34285

## New Mailing Address:

FEI Number: 20-2981479

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

REEGLER, SARI LYNN  
REEGLER & TORNESE, P.A.  
1521 SOUTH TAMiami TRAIL, SUITE 304  
VENICE, FL 32485 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: P ( ) Delete  
Name: DOWD, JOHN F  
Address: 1521 S. TAMiami TRAIL, #303  
City-St-Zip: VENICE, FL 34285

Title: P ( ) Delete  
Name: SWENSEN, SHERRI  
Address: 15720 LAKELAND CIRCLE  
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: GP (X) Change ( ) Addition  
Name: DOWD, JOHN F  
Address: 1521 S. TAMiami TRAIL, #303  
City-St-Zip: VENICE, FL 34285

Title: GP (X) Change ( ) Addition  
Name: WILLIAM, CLAUSS E  
Address: 1361 BROOKSIDE DR  
City-St-Zip: VENICE, FL 34292

Title: GP ( ) Change (X) Addition  
Name: TRITSCHLER, T CHRIS  
Address: 665 N TAMiami TR  
City-St-Zip: NOKOMIS, FL 34275

Title: GP ( ) Change (X) Addition  
Name: MCBRIDE, WILLIAM F  
Address: 2211 CALUSA LAKES BLVD  
City-St-Zip: NOKOMIS, FL 34275

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: JOHN F DOWD

GP

04/03/2009

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