

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT


FILED
Aug 20, 2007 8:00 am
Secretary of State

07-20-2007 90040 028 ****50.00

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07132007 Chg-LLC CR2E083 (12/06)

DOCUMENT # L05000086148					
1. Entity Name PALMALITO, LLC					
Principal Place of Business 2390 E. CAMELBACK ROAD, STE. 325 PHOENIX, AZ 85016			Mailing Address 2390 E. CAMELBACK ROAD, STE. 325 PHOENIX, AZ 85016		
2. Principal Place of Business - No P.O. Box # 3601 US HWY 41 N		3. Mailing Address PO BOX 155			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State PALMETTO, FL		City & State PALMETTO, FL		4. FEI Number 77-0558360	
Zip 34221		Country US		Applied For Not Applicable	
Zip 34221		Country US		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent MOSELEY, THOMAS A ESQ 1724 MANATEE AVENUE WEST BRADENTON, FL 34205			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by September 14, 2007			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM NATIONAL CAFE HARBOR EXCHANGE 2390 E CAMELBACK RD STE 325 PHOENIX, AZ 85016	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR PALMETTO CANNING COMPANY 3601 US HWY 41 N PALMETTO, FL 34221	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR JONATHAN GREENLAW 9652 18TH AVE CIRCLE NW BRADENTON, FL 34209	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. I hereby 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 true 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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: _____			07/13/07 (941) 722-1100		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date Daytime Phone #		