2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000086214

Entity Name: RETIRED PALMS, LLC

WEEKI WACHEE, FL 34613

City-St-Zip:

FILED Apr 30, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 9287 WESTSHORE DRIVE WEEKI WACHEE, FL 34613 **Current Mailing Address: New Mailing Address:** 9287 WESTSHORE DRIVE WEEKI WACHEE, FL 34613 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HERRIN, DUDLEY J JR 9287 WÉSTSHORE DRIVE US WEEKI WACHEE, FL 34613 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete HERRIN, DUDLEY J JR Name: Name: 9287 WESTSHORE DRIVE Address: Address: City-St-Zip: WEEKI WACHEE, FL 34613 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition HERRIN, JUDY C Name: Name: Address: 9287 WESTSHORE DRIVE Address: City-St-Zip: WEEKI WACHEE, FL 34613 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition TREHEY, DANIEL Name: Name: 9239 MISSISSIPPI RUN Address: Address: City-St-Zip: WEEKI WACHEE, FL 34613 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: TREHEY, PAULA Name: 9239 MISSISSIPPI RUN Address: Address: City-St-Zip: WEEKI WACHEE, FL 34613 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition BYRNE, MICHAEL C JR Name: Name: 9172 MISSISSIPPI RUN Address: Address: City-St-Zip: WEEKI WACHEE, FL 34613 City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change () Addition BYRNE, JUDITH C BYRNE, JUDITH A Name: Name: Address: 9172 MISSISSIPPI RUN Address: 9172 MISSISSIPPI RUN

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.

City-St-Zip:

WEEKI WACHEE, FL 34613

SIGNATURE: DUDLEY J. HERRIN, JR. MGRM 04/30/2006