2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 10, 2007
Secretary of State

DOCUMENT# L05000086214

Entity Name: RETIRED PALMS, LLC

Current Principal Place of Business:

9287 WESTSHORE DRIVE
WEEKI WACHEE, FL 34613

New Principal Place of Business:

Current Mailing Address:

9287 WESTSHORE DRIVE
WEEKI WACHEE, FL 34613

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HERRIN, DUDLEY J JR
9287 WESTSHORE DRIVE
WEEKI WACHEE, FL 34613 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:	HERRIN, DUDLEY J JR	
Address:	9287 WESTSHORE DRIVE	
City-St-Zip:	WEEKI WACHEE, FL 34613	
Title:	MGRM	( ) Delete
Name:	HERRIN, JUDY C	
Address:	9287 WESTSHORE DRIVE	
City-St-Zip:	WEEKI WACHEE, FL 34613	
Title:	MGRM	( ) Delete
Name:	TREHEY, DANIEL	
Address:	9239 MISSISSIPPI RUN	
City-St-Zip:	WEEKI WACHEE, FL 34613	
Title:	MGRM	( ) Delete
Name:	TREHEY, PAULA	
Address:	9239 MISSISSIPPI RUN	
City-St-Zip:	WEEKI WACHEE, FL 34613	
Title:	MGRM	( ) Delete
Name:	BYRNE, MICHAEL C JR	
Address:	9172 MISSISSIPPI RUN	
City-St-Zip:	WEEKI WACHEE, FL 34613	
Title:	MGRM	( ) Delete
Name:	BYRNE, JUDITH A	
Address:	9172 MISSISSIPPI RUN	
City-St-Zip:	WEEKI WACHEE, FL 34613	

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:	
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: DUDLEY J. HERRIN, JR. MGRM 04/10/2007

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