

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000087000

Entity Name: PALM TREE MASTERS, LLC

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

10416 NEW BERLIN ROAD
PMB # 219
JACKSONVILLE, FL 32226 US

New Principal Place of Business:

Current Mailing Address:

10416 NEW BERLIN ROAD
PMB # 219
JACKSONVILLE, FL 32226 US

New Mailing Address:

FEI Number: 20-3420742 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALL FLORIDA FIRM INC.
465 S VOLUSIA AVE SUITE C
ORANGE CITY, FL 32763 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: ANDERSON, WILLIAM M
Address: 10416 NEW BERLIN ROAD
City-St-Zip: JACKSONVILLE, FL 32226 US

Title: MGRM () Delete
Name: BRAMLETT, RICHARD J
Address: 10416 NEW BERLIN ROAD
City-St-Zip: JACKSONVILLE, FL 32226 US

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

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Change (X) Addition
Name: CUTSHALL, TROY L
Address: 11246 DISTRIBUTION AVE. EAST SUITE 8
City-St-Zip: JACKSONVILLE, FL 32256

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: WILLIAM M. ANDERSON

MGRM

04/28/2009

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