

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000093497

FILED
Jan 09, 2008
Secretary of State

Entity Name: 2247 PALM BEACH LAKES PROPERTY LLC

Current Principal Place of Business:

% JOHN E. SCHMIDT
2247 PALM BEACH LAKES BLVD., SUITE 101
WEST PALM BEACH, FL 33409

New Principal Place of Business:

JON E. SCHMIDT
2247 PALM BEACH LAKES BLVD., SUITE 101
WEST PALM BEACH, FL 33409

Current Mailing Address:

% JOHN E. SCHMIDT
2247 PALM BEACH LAKES BLVD., SUITE 101
WEST PALM BEACH, FL 33409

New Mailing Address:

JON E. SCHMIDT
2247 PALM BEACH LAKES BLVD., SUITE 101
WEST PALM BEACH, FL 33409

FEI Number: 20-3506943

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHMIDT, JON E
2247 PALM BEACH LAKES BLVD
SUITE 101
WEST PALM BEACH, FL 3309 US

Name and Address of New Registered Agent:

SCHMIDT, JON E
2247 PALM BEACH LAKES BLVD
SUITE 101
WEST PALM BEACH, FL 33409 US

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: JON E SCHMIDT

01/09/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SCHMIDT, JON E
Address: 2247 PALM BEACH LAKES BLVD., SUITE 101
City-St-Zip: WEST PALM BEACH, FL 33409

ADDITIONS/CHANGES:

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

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: JON E SCHMIDT

MGR

01/09/2008

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