


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2007 8:00 am
Secretary of State

05-02-2007 90356 046 ****50.00

DOCUMENT # L05000099045

1. Entity Name
PALMETTO LAKES INVESTMENT COMPANY, LLC




Principal Place of Business Mailing Address

12002 MIRAMAR PARKWAY **12002 MIRAMAR PARKWAY**
MIRAMAR, FL 33025 **MIRAMAR, FL 33025**

DO NOT WRITE IN THIS SPACE

401000



04302007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-3618134	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WAGNER, E. JOHN II
200 SOUTH ORANGE AVENUE
SARASOTA, FL 34236

DO NOT WRITE IN THIS SPACE

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 _____

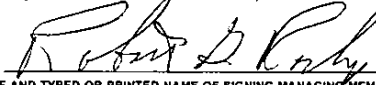
Filing Fee is \$50.00
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR K&R VENTURES LLLP 2040 WHITEFIELD AVE SARASOTA, FL 34243
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOWELL PALMETTO LAKES PARTNERS LLC 12002 MIRAMAR PKWY MIRAMAR, FL 33025
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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:  **ROBERT G. ROSKAMP**
FOR ITS MGR

Date: **4/30/07** Daytime Phone #: **941-555-0302**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #