

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000021334

Entity Name: PORTMAN PALM-AIRE, LLC

FILED
Jan 07, 2009
Secretary of State

Current Principal Place of Business:

20 SW 27TH AVENUE, SUITE 100
POMPAÑO BEACH, FL 33069

New Principal Place of Business:

20 SW 27TH AVENUE, SUITE 300
POMPAÑO BEACH, FL 33069

Current Mailing Address:

20 SW 27TH AVENUE, SUITE 100
POMPAÑO BEACH, FL 33069

New Mailing Address:

20 SW 27TH AVENUE, SUITE 300
POMPAÑO BEACH, FL 33069

FEI Number: 26-3271968

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FINGER, DYLAN
20 SW 27TH AVENUE, SUITE 100
POMPAÑO BEACH, FL 33069 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: PORTMAN, SUSAN R
Address: 1350 RIVER REACH DRIVE, APT. 110
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: MGRM () Delete
Name: FINGER, RONALD
Address: 20906 HAMACA COURT
City-St-Zip: BOCA RATON, FL 33433

Title: MGRM () Delete
Name: FINGER, DYLAN
Address: 18592 OCEAN MIST DRIVE
City-St-Zip: BOCA RATON, FL 33498

Title: MGRM () Delete
Name: NOLK, JULIAN
Address: 23349 DRAYTON DRIVE
City-St-Zip: BOCA RATON, FL 33433

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:

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: DYLAN FINGER

MGRM

01/07/2009

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