

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000103502

FILED
Apr 21, 2009
Secretary of State

Entity Name: PALM ISLAND VENTURES OF TAMPA, LLC

Current Principal Place of Business:

9260 BAY PLAZA BLVD
STE 501
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

% CIBRAN ELJAEK & LOPEZ, P.L.
2601 S BAYSHORE DR - STE 700
COCONUT GROVE, FL 33133

New Mailing Address:

C/O MELLAW REGISTERED AGENTS, LLC
2601 S BAYSHORE DR - STE 700
COCONUT GROVE, FL 33133

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CELLAW REGISTERED AGENTS, LLC
2601 S BAYSHORE DR
STE 700
COCONUT GROVE, FL 33133 US

Name and Address of New Registered Agent:

MELLAW REGISTERED AGENTS, LLC
2601 S BAYSHORE DR
STE 700
COCONUT GROVE, FL 33133 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: SANTIAGO ELJAEK III, MGR

04/21/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: XAVIER HOLDINGS TRUST
Address: 9260 BAY PLAZA BLVD - STE 501
City-St-Zip: TAMPA, FL 33619

Title: MGR () Delete
Name: CAROLYN CORPORATION
Address: 9260 BAY PLAZA BLVD - STE 501
City-St-Zip: TAMPA, FL 33619

ADDITIONS/CHANGES:

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: XAVIER HOLDINGS TRUST

MGR

04/21/2009

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