

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000124639

FILED  
Apr 16, 2008  
Secretary of State

Entity Name: PALMS AT PINE ISLAND GP, LLC

**Current Principal Place of Business:**

1520-360 ROYAL PALM SQUARE BLVD.  
FORT MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

1520-360 ROYAL PALM SQUARE BLVD.  
FORT MYERS, FL 33919

**New Mailing Address:**

FEI Number: 30-0455395

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HAMLIN, CURTIS D ESQ.  
PORGES, HAMLIN, KNOWLES, PROUTY, THOMPSON  
1205 MANATEE AVENUE WEST  
BRADENTON, FL 34205 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: NATIONAL DEVELOPMENT, OF AMERICA, L L C  
Address: 1520-360 ROYAL PALM SQUARE BLVD.  
City-St-Zip: FORT MYERS, FL 33919

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: BOWEN A. ARNOLD

MM

04/16/2008

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