

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000065294

**FILED**  
**Mar 30, 2010**  
**Secretary of State**

**Entity Name:** PALMS CONFERENCE CENTER LLC

**Current Principal Place of Business:**

1615 FL. AVE  
PANAMA CITY, FL 32405

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2222  
PANAMA CITY, FL 32402

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

COOLEY, TOMMY M  
712 MOORE CIRCLE  
PANAMA CITY, FL 32401 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: MGR  
Name: COOLEY, TOMMY M  
Address: 712 MOORE CIRCLE  
City-St-Zip: PANAMA CITY, FL 32401

Title: MGRM  
Name: COOLEY, TOMMY M JR.  
Address: 151 COGOTER PASS  
City-St-Zip: PANAMA CITY BEACH, FL 32407

I hereby 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:** TOMMY COOLEY JR

MGRM

03/30/2010

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