

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000036399

**FILED**  
**Apr 23, 2012**  
**Secretary of State**

**Entity Name:** ROBERT PALMER CONTRACTING LLC

**Current Principal Place of Business:**

2029 NE 5TH AVENUE  
CAPE CORAL, FL 33909

**New Principal Place of Business:**

18556 SLATER ROAD  
NORTH FORT MYERS, FL 33917

**Current Mailing Address:**

2029 NE 5TH AVENUE  
CAPE CORAL, FL 33909

**New Mailing Address:**

18556 SLATER ROAD  
NORTH FORT MYERS, FL 33917

FEI Number: 30-0622052

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PALMER, ROBERT C  
2029 NE 5TH AVENUE  
CAPE CORAL, FL 33909 US

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

PALMER, ROBERT C  
18556 SLATER ROAD  
NORTH FORT MYERS, FL 33917 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: ROBERT C. PALMER

04/23/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: PALMER, ROBERT C  
Address: 18556 SLATER ROAD  
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: MGR  
Name: PALMER, JOYCE A  
Address: 18556 SLATER ROAD  
City-St-Zip: NORTH FORT MYERS, FL 33917

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: ROBERT C. PALMER

MGR

04/23/2012

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