## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L98000000473

City-St-Zip:

TAMPA, FL 336798425

FILED Jan 14, 2007 Secretary of State

Entity Name: THE PALM BUILDINGS LIMITED LIABILITY COMPANY

**Current Principal Place of Business: New Principal Place of Business:** 441 PALM AVENUE BOCA GRANDE, FL 33921 **Current Mailing Address: New Mailing Address:** P.O. BOX 1406 BOCA GRANDE, FL 33921 FEI Number: 65-0903029 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ITALIANO, NELSON A II ITALIANO, NELSON A II 441 PALM AVENUE 441 PALM AVENUE BOCA GRANDE, FL 33921 US P.O. BOX 1406 BOCA GRANDE, FL 33921 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: NELSON A. ITALIANO II 01/14/2007 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete INGRAM, MICHAEL M Name: Name: 421 PALM AVENUE Address: Address: City-St-Zip: BOCA GRANDE, FL 33921 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: BROWNE, HENRY J Name: Address: 320 TARPON AVENUE Address: City-St-Zip: BOCA GRANDE, FL 33921 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition ITALIANO, NELSON A II Name: Name: Address: 431 PARK AVENUE Address: City-St-Zip: BOCA GRANDE, FL 33921 City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition Name: ITALIANO, JEFFREY G Name: Address: P.O. BOX 18425 Address:

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: NELSON A. ITALIANO II MGRM 01/14/2007