

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L98000000473

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Entity Name:** THE PALM BUILDINGS LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

441 PALM AVENUE  
BOCA GRANDE, FL 33921

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1406  
BOCA GRANDE, FL 33921

**New Mailing Address:**

**FEI Number:** 65-0903029

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ITALIANO, NELSON A II  
441 PALM AVENUE  
BOCA GRANDE, FL 33921 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:** MGRM  
**Name:** ITALIANO, NELSON A II  
**Address:** 441 PALM AVENUE  
**City-St-Zip:** BOCA GRANDE, FL 33921

**Title:** MGRM  
**Name:** ITALIANO, JEFFREY G  
**Address:** P.O. BOX 18425  
**City-St-Zip:** TAMPA, FL 33679

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:** JEFFREY G. ITALIANO

MGRM

01/04/2012

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