

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 11, 2007 8:00 am
Secretary of State

04-09-2007 90342 046 ****50.00

DOCUMENT # L99000002927

1. Entity Name
PALMDALE OIL COMPANY OF FORT PIERCE, L.L.C.



Principal Place of Business
**911 NORTH 2ND STREET
FT. PIERCE, FL 34990**

Mailing Address
**911 NORTH 2ND STREET
FT. PIERCE, FL 34990**

30007375



DO NOT WRITE IN THIS SPACE

03272007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
65-0923035

Applied for
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**KINO, GREGORY S ESQUIRE
515 NORTH FLAGLER #1700
WEST PALM BEACH, FL 33401**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when non-stating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**MGRM
CHEATHAM, LACHLAN
911 NORTH 2ND STREET
FT. PIERCE, FL 34990**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**MGR
SALMON, NITA
911 NORTH 2ND STREET
FT PIERCE, FL 34950**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

5/7/07

5/7/07

DATE

DATE