



2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED

Feb 07, 2004 08:00 AM
Secretary of State

DOCUMENT # L99000003664 1. Entity Name PALM COVE MARINA, LLC						 MOORE CR2E083 (11/03)	
Principal Place of Business 14603 BEACH BLVD. JACKSONVILLE FL 32250				Mailing Address 14603 BEACH BLVD. JACKSONVILLE FL 32250			
2. Principal Place of Business		3. Mailing Address		4. FEI Number 59-3586166 Applied For Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
Zip		Country		Zip		Country	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
FOSTER, RONALD H SR 2900 HARTLEY ROAD JACKSONVILLE FL 32257				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				City FL Zip Code			
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____							
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2004							
9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES			
TITLE	MGRM <input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	FOSTER, RONALD H SR			NAME	U00000039828 02/09/04-80019-022 55.00		
STREET ADDRESS	2900 HARTLEY ROAD			STREET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32257			CITY-ST-ZIP			
TITLE	MGR <input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	PURCELL, KENNETH V			NAME			
STREET ADDRESS	14603 BEACH BLVD			STREET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32250			CITY-ST-ZIP			
TITLE	V <input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SMITH, DONALD L			NAME			
STREET ADDRESS	2900 HARTLEY ROAD			STREET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32257			CITY-ST-ZIP			
TITLE	MGR <input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	FOSTER, RONALD H JR			NAME			
STREET ADDRESS	2900 HARTLEY ROAD			STREET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32257			CITY-ST-ZIP			
TITLE	MGR <input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	FOSTER, RYAN J			NAME			
STREET ADDRESS	2900 HARTLEY ROAD			STREET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32257			CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				NAME			
STREET ADDRESS							
CITY-ST-ZIP							
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>Kenneth V. Purcell</i> Kenneth V. Purcell				Date: 1/24/04 Daytime Phone #: 904-223-4757			