


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 12, 2006 08:00 AM
Secretary of State

DOCUMENT # M01000000326

1. Entity Name
PALM TREE INVESTMENTS, LLC



Principal Place of Business
**174 MARKET ST INN ROAD
 DESTIN, FL 32550**

Mailing Address
**P.O. BOX 490
 BENTONVILLE, AR 72712**



04062006 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

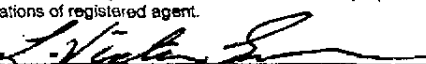
4. FEI Number 71-0848683	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**EVANS, VICTOR
 174 MARKET STREET IN ROAD
 DESTIN, FL 32550**

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:  DATE: **4-7-06**

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

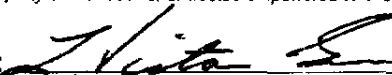
**Filing Fee is \$50.00
 Due by May 1, 2006**

000000505560
 04/26/06-80119-021 \$5.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM EVANS, VICTOR 174 MARKET STREET INN ROAD DESTIN, FL 32550
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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 609, Florida Statutes.

SIGNATURE:  DATE: **4-7-06** DAYTIME PHONE #: **479-8678**

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