


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Feb 04, 2008 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**

**DO NOT WRITE IN THIS SPACE**



01072008No Chg-LLC CR2E083 (12/07)

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

6. Name and Address of Current Registered Agent

**EVANS, VICTOR  
 174 MARKET STREET INN 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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$138.75  
 After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM EVANS, VICTOR 174 MARKET STREET INN ROAD DESTIN, FL 32550</b>
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 02/12/08-80071-007 138.75

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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 608, Florida Statutes.

**SIGNATURE:** *S. Victor Evans* **1-29-08 479-254-8678**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #