


# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jul 18, 2005 8:00 am**  
**Secretary of State**

07-18-2005 90110 001 \*\*\*\*55.00

<b>DOCUMENT # M03000002304</b> 1. Entity Name <b>R.J. PALMER LLC</b>					
Principal Place of Business <b>156 WEST 56TH STREET NEW YORK, NY 10019</b>			Mailing Address <b>156 WEST 56TH STREET NEW YORK, NY 10019</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.:		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	07082005    Chg-LLC    CR2E083 (10/03)	
4. FEI Number <b>52-2279751</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				<b>\$5.00</b> Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>LORD, BENJAMIN F.D. C/O YESAWICH, PEPPERDINE &amp; BROWN 423 SOUTH KELLER ROAD, SUITE #100 ORLANDO, FL 32810</b>			Name Street Address (P.O. Box Number is Not Acceptable) City		
			State <b>FL</b> 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 _____					
<b>Filing Fee is \$50.00 Due by September 7, 2005</b>		<b>Make check payable to Florida Department of State</b>			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR PRIGNANO, ROBERT 178 LAKE ROAD HUNTINGTON, NY 11748</b>	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR KNOBLOCK, PETER 19 BEACH CROFT ROAD GREENWICH, CT 06830</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR VAIL, JAMES P 109 SHADY KNOLL LANE NEW CANAN, CT 06840</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR PETER, STIEGLITZ 64 SANDPIPER DRIVE MANALAPAN, NJ 07726</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.					
<b>SIGNATURE:</b> <i>P. Stiglitz</i>				Date <b>7-11-05</b>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					

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