2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 03, 2008 08:00 AM
Secretary of State

DOCUMENT # M05000004765

1. Entity Name
PALM BAY ENTERPRISES LLC

Principal Place of Business	Mailing Address
3272 OAK KNOLL DR. PEPPER PIKE, OH 44124	3272 OAK KNOLL DR. PEPPER PIKE, OH 44124

DO NOT WRITE IN THIS SPACE

03162008 No Chg-LLC CR2E083 (12/07)

4. FEI Number
20-3148606
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

ELK, ARTHUR
6279 SAN MILCHEL WAY
DELRAY BEACH, FL 33484

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

U00000879384
04/15/08-80017-018 138.75

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	COHEN, MARTIN J
STREET ADDRESS	3272 OAK KNOLL DR.
CITY-ST-ZIP	PEPPER PIKE, OH 44124
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Martin J Cohen 3/30/08 440-886-0123
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #