## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000077980

Entity Name: PALM PRO, LLC

**Current Principal Place of Business:** 

150 SOUTH MAIN STREET SUITE 3

LABELLE, FL 33935

**Current Mailing Address:** 

P.O. BOX 250

LABELLE, FL 33975 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

**FILED** Feb 17, 2016

**Secretary of State** 

CC9427336339

Name and Address of Current Registered Agent:

WATKINS, JOHN J 150 SOUTH MAIN STREET SUITE 3 LABELLE, FL 33935 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

## Authorized Person(s) Detail:

Title MGRM

WATKINS, JOHN J Name P.O. BOX 250 Address

City-State-Zip: LABELLE FL 33975

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.