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	BRADFORD WARREN			06/30/2013
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGRM	Title	MGRM	
Name	WARREN, BRADFORD	Name	WARREN, BRADFORD	
Address	462 NW LINCOLN AVENUE	Address	462 NW LINCOLN AVENUE	
City-State-Zip:	PORT ST LUCIE FL 34983	City-State-Zip:	PORT ST LUCIE FL 34983	

Current Mailing Address:

PORT ST LUCIE. FL 34983 US

Name and Address of Current Registered Agent:

WARREN, BRADFORD 462 NW LINCOLN AVENUE PORT ST LUCIE, FL 34983 US

Autho

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRADFORD WARREN

MGM

06/30/2013

Electronic Signature of Signing Authorized Person(s) Detail

Entity Name: PALM TREE HOMES LLC

2013 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

Current Principal Place of Business:

462 NW LINCOLN AVENUE PORT ST LUCIE. FL 34983

462 NW LINCOLN AVENUE

FEI Number: APPLIED FOR

Certificate of Status Desired: Yes

FILED Jun 30, 2013 Secretary of State CC6196789374

Date