

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000164797

**Entity Name:** LITTLE PALM VILLAS, LLC

**Current Principal Place of Business:**

117 S. CARROLL ST  
ISLAMORADA, FL 33036

**Current Mailing Address:**

PO BOX 1298  
ISLAMORADA, FL 33036

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CATARINEAU, JOE A ESQ  
91750 OVERSEAS HIGHWAY  
TAVERNIER, FL 33070 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 MGR  
Name SENA, PHILLIP  
Address 117 S CARROLL ST  
City-State-Zip: ISLAMORADA FL 33036

*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.*

**SIGNATURE:** PHILLIP SENA

**MEMBER**

**01/25/2016**

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date