

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000027153

FILED  
Jul 09, 2008  
Secretary of State

Entity Name: HEAD LAND, BAY COUNTY, LLC

**Current Principal Place of Business:**

17760 BACK BEACH ROAD  
PANAMA CITY BEACH, FL 32413

**New Principal Place of Business:**

17760 PANAMA CITY BCH PKWY  
PANAMA CITY BEACH, FL 32413

**Current Mailing Address:**

17760 BACK BEACH ROAD  
PANAMA CITY BEACH, FL 32413

**New Mailing Address:**

17760 PANAMA CITY BCH PKWY  
PANAMA CITY BEACH, FL 32413

FEI Number: 20-0274124      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

HEAD, WILLIAM M  
17760 BACK BEACH ROAD  
PANAMA CITY BEACH, FL 32413      US

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

HEAD, WILLIAM M  
17760 PANAMA CITY BCH PKWY  
PANAMA CITY BEACH, FL 32413      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: WILLIAM M HEAD

07/09/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: HEAD, HILARY E  
Address: 14854 BAYVIEW CIRCLE  
City-St-Zip: PANAMA CITY BEACH, FL 32413

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE: HILARY E HEAD

MGR

07/09/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date