2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 11, 2007 08:00 A
Secretary of State

DOCUMENT # L05000036748

1. Entity Name
WADY DEVELOPMENT LLC

Principal Place of Business	Mailing Address
12439 PERKINS ROAD SOUTHPORT, FL 32409 US	12439 PERKINS ROAD SOUTHPORT, FL 32409 US

04102007No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2673023
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

PARIS, BRENDA
12439 PERKINS ROAD
SOUTHPORT, FL 32409

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	PARIS, BRENDA
STREET ADDRESS	12439 PERKINS ROAD
CITY-ST-ZIP	SOUTHPORT, FL 32409
TITLE	MGR
NAME	PARIS, RALPH
STREET ADDRESS	12439 PERKINS ROAD
CITY-ST-ZIP	SOUTHPORT, FL 32409
TITLE	MGR
NAME	DANIELS, JACK
STREET ADDRESS	112 JOY CIRCLE
CITY-ST-ZIP	PANAMA CITY, FL 32405
TITLE	MGR
NAME	DANIELS, VICKIE
STREET ADDRESS	112 JOY CIRCLE
CITY-ST-ZIP	PANAMA CITY, FL 32405
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000699120
04/19/07-80030-001 50.00

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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: Brenda Paris Brenda Paris 4-10-2007 (850) 265-9939
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #