

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000005784

FILED  
Aug 30, 2004  
Secretary of State

Entity Name: PARROTHEAD PROPERTIES, L.L.C.

**Current Principal Place of Business:**

79 STINGRAY STREET  
DESTIN, FL 32541

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 214  
DESTIN, FL 32540

**New Mailing Address:**

FEI Number: 59-3738475      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BARTH, JAMES C  
30 SOUTH SHORE DRIVE  
DESTIN, FL 32541    US

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

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

**MANAGING MEMBERS/MEMBERS:**

Title: MGR      ( ) Delete  
Name: NOBLIN, DAVID  
Address: 79 STINGRAY STREET  
City-St-Zip: DESTIN, FL 32541

Title: MGR      ( ) Delete  
Name: NOBLIN, JEFF  
Address: 11 SCHOONER LANE  
City-St-Zip: OCEAN SPRINGS, MS 39564

Title: MGR      ( ) Delete  
Name: POPE, NELSON  
Address: 120 HAWKRIDGE DRIVE  
City-St-Zip: MADISON, MS 39110

Title: MGR      ( ) Delete  
Name: GABARDI, CURT  
Address: 29 MOSS FOREST CIRCLE  
City-St-Zip: JACKSON, MS 39211

**ADDITIONS/CHANGES:**

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAVID NOBLIN

PRES

08/30/2004

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