2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000005784

Name:

Address:

City-St-Zip:

GABARDI, CURT

29 MOSS FOREST CIRCLE

JACKSON, MS 39211

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

FILED May 01, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 31 BALLAMORE MIRAMAR BEACH, FL 32550 **Current Mailing Address: New Mailing Address:** P.O. BOX 214 DESTIN, FL 32540 FEI Number: 59-3738475 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () 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: Name and Address of New Registered Agent: BARTH, JAMES C 30 SOUTH SHORE DRIVE DESTIN, FL 32541 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/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete NOBLIN, DAVID Name: Name: Address: 31 BALLAMORE Address: City-St-Zip: MIRAMAR BEACH, FL 32550 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: NOBLIN, JEFF Name: Address: 11 SCHOONER LANE Address: City-St-Zip: OCEAN SPRINGS, MS 39564 City-St-Zip: Title: MGR () Delete Title: () Change () Addition POPE, NELSON Name: Name: 120 HAWKRIDGE DRIVE Address: Address: City-St-Zip: MADISON, MS 39110 City-St-Zip: Title: MGR () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JAMES DAVID NOBLIN PRES 05/01/2008