2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L00000007593

1. Entity Name
TIDEWATER BEACH EAST DEVELOPMENT, L.L.C.

Principal Place of Business	Mailing Address
1122 BALL ST STE B PERRY, GA 31069	2004 TUCKER RD. PERRY, GA 31069

DO NOT WRITE IN THIS SPACE

04142005No Chg-LLC   CR2E083 (10/03)

4. FEI Number 59-3666799	Applied For
	Not Applicable

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

6. Name and Address of Current Registered Agent

WALTERS, ELIZABETH J ESQ
BURKE & BLUE PA
221 MCKENZIE AVE
PANAMA CITY, FL 32401

DO NOT WRITE IN THIS SPACE

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 _____

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

Filing Fee is $50.00
Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	KLEIN, HERMAN F JR
STREET ADDRESS	1122 BALL ST STE B
CITY-ST-ZIP	PERRY, GA 31069
TITLE	MGRM
NAME	HENRY, THOMAS B JR
STREET ADDRESS	724 HWY 98 E UNIT 101
CITY-ST-ZIP	DESTIN, FL 32541
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

UFICIUU310339
04/16/05-80072-016 50.00

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify 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 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: _Kurtis D. Woods_   4/14/05   (478) 988-3765

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #