

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000008986

Entity Name: LONG POINT COVE, L.L.C.

FILED
Apr 30, 2005
Secretary of State

Current Principal Place of Business:

40001 EMERALD COAST PARKWAY
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

40001 EMERALD COAST PARKWAY
DESTIN, FL 32541

New Mailing Address:

FEI Number: 59-3729256

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATTHEWS, DANA C ESQ.
4475 LEGENDARY DRIVE
BOX 40
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: MGRM () Delete
Name: THEME PARKS, INC,
Address: 40001 EMERALD CT PKWY
City-St-Zip: DESTIN, FL 32541

Title: MGRM () Delete
Name: OAKMONT DEVELOPMENT, INC
Address: 40001 EMERALD CT PARKWAY
City-St-Zip: DESTIN, FL 32541

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

Title: S/T () Change (X) Addition
Name: MCDOWELL, GINGER
Address: 499 PLEASANT RIDGE ROAD
City-St-Zip: DEFUNIAK SPINGS, FL 32433 US

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: MIKE ADKINSON

P

04/30/2005

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