

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000016891

Entity Name: MAJESTIC SUN, L.L.C.

FILED
May 17, 2006
Secretary of State

Current Principal Place of Business:

PO BOX 1043
FREEPORT, FL 32439 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1043
FREEPORT, FL 32439 US

New Mailing Address:

FEI Number: 59-3749290 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:

MATTHEWS, DANA C ESQ.
MATTHEWS & HAWKINS, P.A.
4475 LEGENDARY 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/MANAGERS:

Title: MGR () Delete
Name: LAIRD, HARRY A III
Address: 2188 BAY GROVE RD S
City-St-Zip: FREEPORT, FL 32439

Title: MGR () Delete
Name: JONES, C WAYNE
Address: 184 TWELVE OAKS LN
City-St-Zip: FREEPORT, FL 32439

Title: MGR () Delete
Name: SMITH, WILLIAM H
Address: 4039 E CO HWY 30-A
City-St-Zip: SEAGROVE BEACH, FL 32459

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:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: HARRY A LAIRD, III

MGR

05/17/2006

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