

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000011726 1. Entity Name ESCAMBIA LAND DEVELOPMENT COMPANY, L.L.C.					
Principal Place of Business 7920 CENTURY BLVD. CENTURY FL 32535			Mailing Address 3421 HIGHWAY 4 WEST CENTURY FL 32535		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 27-0044404	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent BOOTH-MORAN, JULIE L THE REVOCABLE TRUST OF JULIE LYNN BOOTH 3421 HIGHWAY 4 WEST CENTURY FL 32535				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____					
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2006					
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BOOTH-MORAN, JULIE L 3421 HIGHWAY 4 WEST CENTURY FL 32535	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	1000000460320 03/23/06-80006-002 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MORAN, WALLACE D 3421 HIGHWAY 4 WEST CENTURY FL 32535	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: <i>Julie L. Booth Moran</i>				3-9-06 85025634	