2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# L02000018884

Entity Name: COBO OF PENSACOLA, LLC

Current Principal Place of Business:

285 MORRISON AVENUE
SANTA ROSA BEACH, FL 32459 US

New Principal Place of Business:

181 PINE STREET
SANTA ROSA BEACH, FL 32459 US

Current Mailing Address:

285 MORRISON AVENUE
SANTA ROSA BEACH, FL 32459 US

New Mailing Address:

181 PINE STREET
SANTA ROSA BEACH, FL 32459 US

FEI Number: 42-1544473 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COVELL, SCOTT M
285 MORRISON AVENUE
SANTA ROSA BEACH, FL 32459 US

Name and Address of New Registered Agent:

COVELL, SCOTT M
181 PINE STREET
SANTA ROSA BEACH, FL 32459 US

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: _____ 04/28/2006
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: COVELL, SCOTT M
Address: 285 MORRISON AVENUE
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

Title: MGRM ( ) Delete
Name: BOHANNON, TAMMY V
Address: 900 LARGO DRIVE
City-St-Zip: PENSACOLA BEACH, FL 32561 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: COVELL, SCOTT M
Address: 181 PINE STREET
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

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: SCOTT M. COVELL MGRM 04/28/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date