2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 25, 2007 8:00 am Secretary of State

| DOCUMENT # L02000025068 1. Entity Name MEXICO BEACH VILLAS, L.L.C. | | | | | | 04-11-2007 | 7 90159 0 | 41 ****5 | 50.00 | |
|---|--|--|---|---|---|---|---------------------|--------------------------|------------------------------|--|
| Principal Place of Business 1431 TROUT DRIVE PANAMA CITY BEACH, FL 32411 | | Mailing Address P.O. BOX 28329 PANAMA CITY BEACH, FL 32411 | | | 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 | 30005 11 18 18 18 18 18 18 18 18 18 18 18 18 1 | | u sênî duk c | rim in Alar | |
| 2. Principal Place of Business - No P.O. Box # | | 3. Mailing Address | | | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | 03282007 | Chg-LLC | CR2E0 | 33 (12/06) | | |
| City & State | | City & State | | | 4. FEI Numbe 51-0430 | | | —— | oplied For Applicable | |
| Zip | Country | Zip | Country | | 5. Certificate | of Status Desired | | \$5.00 Add ee Require | | |
| | 6. Name and Address of Current | Registered Agent | | | 7. Name and | Address of New I | Registered A | gent | | |
| CHEETER D. LOCDELLA | | | | Name | | | | | | |
| SHEFFIELD, JOSPEH A 1431 TROUT DRIVE PANAMA CITY BEACH, FL 32411 | | | Street | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| | | | | _ | · · - <u></u> | | | | | |
| | | | City | | FL Zip Code | | | | | |
| the obligate | Sgraure, sped or prined name of registered agent Illing Pee is \$50,00 | | s registered office | | | | DATE ke check pa | yable to | | |
| Đuo try May 1, 2007 | | | | Florida Department of State | | | | • | | |
| 9. | | | | | | | | | | |
| 3. | MANAGING MEMBE | ERS/MANAGERS | 10. | | | ADDITIONS | /CHANGES | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MANAGING MEMBE MGR SHEFFIELD, JOSEPH A P.O. BOX 28329 PANAMA CITY BEACH, FL 324 | 🖾 Delete | 10. ITLE NAME STREET ADDRESS CITY-SI-ZIP | | | ADDITIONS | CHANGES | Change | Addition | |
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutas. 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.

1 Seffeed 03/24/07

850-233-0956