2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000027455

Entity Name: DESIGN DEVELOPMENT - WATERCOLOURS MARKET LLC

FILED Jan 04, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2880 GULF BREEZE PKWY

GULF BREEZE, FL 32563 US

1507 BAYWOODS ROAD
GULF BREEZE, FL 32563 US

Current Mailing Address: New Mailing Address:

2880 GULF BREEZE PKWY

GULF BREEZE, FL 32563 US

1507 BAYWOODS ROAD

GULF BREEZE, FL 32563 US

FEI Number: 45-0488220 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HOLMAN, SUZANNE W
2880 GULF BREEZE PKWY
GULF BREEZE, FL 32563 US
HOLMAN, SUZANNE W
1507 BAYWOODS ROAD
GULF BREEZE, FL 32563 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: SUZANNE HOLMAN 01/04/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: () Delete (X) Change () Addition HOLMAN, SUZANNE W HOLMAN, SUZANNE W Name: Name: 2880 GULF BREEZE PKWY Address: 1507 BAYWOODS ROAD Address: City-St-Zip: GULF BREEZE, FL 32563 City-St-Zip: GULF BREEZE, FL 32563

Title: MGRM () Delete Title: () Change () Addition Name: HOLMAN, WILLIAM P Name:

 Name:
 HOLMAN, WILLIAM P
 Name:

 Address:
 2513 ROSEDOWN DRIVE
 Address:

 City-St-Zip:
 CANTONMENT, FL 32533
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 MARCUS, ROBERT M
 Name:

 Address:
 2388 W. BAYSHORE
 Address:

 City-St-Zip:
 GULF BREEZE, FL 32561
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 SANDERS, JOHN P
 Name:

 Address:
 10205 HOLSBERRY RD.
 Address:

 City-St-Zip:
 PENSACOLA, FL 32534
 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: SUZANNE HOLMAN MGRM 01/04/2007