2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

RE: NATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MUMBER, MA

Apr 28, 2006 8:00 am Secretary of State **DOCUMENT # L03000004738** THE VILLAGE AT SEAGROVE BEACH DEVELOPERS. 04-28-2006 90014 013 ****50.00 L.L.Ç. Principal Place of Business Mailing Address 119 EUCLID AVE. 119 EUCLID AVE. BIRMINGHAM, AL 35213 BIRMINGHAM, AL 35213 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04202006 Chg-LLC CR2E083 (11/05) City & State City & State 4. FEI Number Applied For 06-1682381 Not Applicable Zip Zip Country Country \$5.00 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WALTERS, ELIZABETH J Street Address (P.O. Box Number is Not Acceptable) 221 MCKENZIE AVE. PANAMA CITY, FL 32401 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Make check payable to Due by May 1, 2006 Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. MGRM TITLE TITLE ☐ Delete ☐ Change ☐ Addition BURNHAM, WESLEY L JR. NAME NAME 11212 FRONT BEACH RD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PANAMA CITY BEACH, FL 32407 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Detete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 recurre this report as required by Chapter 608, Florida Statutes.

WESLEY L. BURNHAM TR. 4-24-06 (205)879-7720

ANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

FILED