

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000019518

FILED
Apr 30, 2006
Secretary of State

Entity Name: EMERALD COAST REALTY OF N.W. FLORIDA, L.L.C.

Current Principal Place of Business:

11821 LOGANFIELD COURT
CINCINNATI, OH 45249

New Principal Place of Business:

PO BOX 498249
CINCINNATI, OH 45249

Current Mailing Address:

11821 LOGANFIELD COURT
CINCINNATI, OH 45249

New Mailing Address:

PO BOX 498249
CINCINNATI, OH 45249

FEI Number: 20-0138878

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COX, M.HUGH
5530 THOMAS DRIVE
THE COTTAGE
PANAMA CITY BEACH, FL 32408 US

Name and Address of New Registered Agent:

DELORIEA, JEANNIE
5700 THOMAS DRIVE
PANAMA CITY BEACH, FL 32408 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: JEANNIE DELORIEA

04/30/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BRADBURY, KENNETH W
Address: 11821 LOGANFIELD CT
City-St-Zip: CINCINNATI, OH 45249

Title: MGRM (X) Delete
Name: BRADBURY, MARION M
Address: 11821 LOGANFIELD CT
City-St-Zip: CINCINNATI, OH 45249

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BRADBURY, KENNETH W
Address: PO BOX 498249
City-St-Zip: CINCINNATI, OH 45249

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: KEN BRADBURY

MR

04/30/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date