2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 01, 2006 8:00 am
Secretary of State
03-01-2006 90224 041 ****50.00

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1. Entity Name
MILL BAYOU LAND AND DEVELOPMENT, L.L.C.

Principal Place of Business	Mailing Address
1233 HUNTINGTON RIDGE ROAD LYNN HAVEN, FL 32444	1233 HUNTINGTON RIDGE ROAD LYNN HAVEN, FL 32444

02272006 Chg-LLC CR2E083 (11/05)

2. Principal Place of Business	3. Mailing Address
4403 Bayou Oaks	4403 Bayou Oaks Dr
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Panama City FL	City & State: Panama City FL
Zip: 32404 County: Bay	Zip: 32404 Country: Bay

4. FEI Number: 74-3100064 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

PUTMAN, RON
1233 HUNTINGTON RIDGE ROAD
LYNN HAVEN, FL 32444

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL 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 ______________________________
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
Due by May 1, 2006

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RON PUTMAN CONSTRUCTION, INC. 1233 HUNTINGTON RIDGE ROAD LYNN HAVEN, FL 32444 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 4403 Bayou Oaks Dr Panama City FL 32404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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 execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Ron Putman 2-28-06 (850) 522 7166