

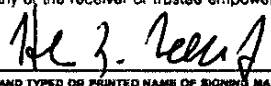


**FILED**  
**Apr 13, 2006 8:00 am**  
**Secretary of State**

04-13-2006 90138 001 \*\*\*400.00

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

<b>DOCUMENT # L03000033351</b>			
1. Entity Name <b>BAB DEVELOPERS V, LLC</b>			
Principal Place of Business <b>101-A BUSINESS CENTRE DR. DESTIN, FL 32550 US</b>		Mailing Address <b>101-A BUSINESS CENTRE DR. DESTIN, FL 32550 US</b>	
<b>DO NOT WRITE IN THIS SPACE</b>			
		 01052006 No Chg-LLC CR2E083 (11/05)	
		4. FEI Number <b>NOT APPLICABLE</b>	Applied For <b>Not Applicable</b>
		5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>NEESE, HERMAN L JR 101-A BUSINESS CENTRE DRIVE DESTIN, FL 32550</b>		<b>DO NOT WRITE IN THIS SPACE</b>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when relinquishing) DATE _____</small>			
<b>Filing Fee is \$50.00 Due by May 1, 2006</b>			
9. MANAGING MEMBERS/MANAGERS		<b>DO NOT WRITE IN THIS SPACE</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM A&J HOLDINGS, LLC 101-A BUSINESS CENTRE DR. DESTIN, FL 32550		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS 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 execute this report as required by Chapter 608, Florida Statutes.			
SIGNATURE: 		Herman L. Neese, Jr., Authorized Rep. 850-269-2678	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date</small>	<small>Daytime Phone #</small>