103000037521

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	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
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COVER LETTER

Registration Section
Division of Corporations TO:

SUBJECT: Grand Lagoon Yacht Club of Panama City Beach, LLC (Name of Limited Liability Company)

Dear Sir or Madam:			
The enclosed Registered Agent/Registered C	office Change a	and fee(s) are submitte	ed for filing.
Please return all correspondence concerning	this matter to t	the following:	
Catharina Hantar			<u>o</u> ,
Catherine Hester			49 7
(Name of Person)			FILE OF STATE OF STAT
Harrison, Rivard & Bennett			
(Firm/Company)		-	of St.
101 Harrison Avenue			
(Address)		-	ア
Panama City, Florida 32401			
(City/State and Zip Code)		-	
For further information concerning this matt	er, please call:		
Catherine Hester	_at (850	769-7714	
(Name of Person)	(Area Code & Daytim	e Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Regi Divi P.O.	ILING ADDRESS: istration Section sion of Corporations Box 6327 ahassee, Florida 32314	
Enclosed is a check for the following	ıg amount:	•	
\$25 Filing Fee	\$5 5	5 Filing Fee & Certific	ed Copy



Division of Corporations

January 25, 2007

CATHERINE HESTER 101 HARRISON AVENUE PANAMA CITY, FL 32401

SUBJECT: GRAND LAGOON YACHT CLUB OF PANAMA CITY BEACH, LLC

Ref. Number: L03000037521

We have received your document for GRAND LAGOON YACHT CLUB OF PANAMA CITY BEACH, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 608.407, Florida Statutes, requires the document(s) to be signed by member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 007A00005942

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

10/1/03	L03000037521	
3. Date of filing/registration in Florida	4. Document number	
5. The name of the registered agent and the registere Florida Department of State:	d office address as shown on the records of the	
Derrick Bennett		
	me	
101 Harrison Avenue		Õ.
·	ress	7
Panama City, Florida City, Stat	e and Zip	OT FEB
**	· · · · · · · · · · · · · · · · · · ·	Ġ
5. The name and address of the new registered agent	and of other.	77
William C. Grubbs		至
Nam		· ·
5901 Magnolia Beach		1 5
Florida street address (P.	O. Box NOT acceptable)	
Panama City Beach, p	L 32408	
City, State		
If the limited liability company is not organized und confirmed that after the change or changes are made and the business office of the registered agent will be liability company, it is hereby confirmed that the character of the members of the limited liability company or a for the operating agreement of the limited liability company or the operating agreement of the limited liability company or a statistic of a member of an authorized representative of a member)	, the Florida street address of the registered office e identical. Or, in the case of a Florida limited ange(s) was/were authorized by an affirmative vot as otherwise provided in the articles of organizatio	e
William C. Grubbs		
(Printed or typed name of signee)	na and a state of the state of	
I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being filed address, I hereby confirm that the limited liability co	t and agree to act in this capacity. I further agree the proper and complete performance of my dutie my position as registered agent as provided for ir I to merety reflect a change in the registered office omnany has been notified in writing of this change	to 3, 1

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00