

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000053047

**FILED**  
**Apr 10, 2008**  
**Secretary of State**

**Entity Name:** SANTA ROSA-PACIFIC, L.L.C.

**Current Principal Place of Business:**

694 BALDWIN AVENUE  
DEFUNIAK SPRINGS, FL 32435

**New Principal Place of Business:**

694 BALDWIN AVENUE  
SUITE 1  
DEFUNIAK SPRINGS, FL 32435

**Current Mailing Address:**

P.O. BOX 1673  
SANTA ROSA BEACH, FL 32459

**New Mailing Address:**

**FEI Number:** 33-1082402      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DAVIS, MARK D  
694 BALDWIN AVENUE  
DEFUNIAK SPRINGS, FL 32435      US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: MCGILL, GORDON R  
Address: 193 BOTANY BAYOU BLVD  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MGRM      ( ) Delete  
Name: ANDERS, JAMES F II  
Address: 10 COVE CREEK LANE  
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: MGRM      ( ) Delete  
Name: HILDRETH, EMMETT F JR  
Address: POST OFFICE BOX 1673  
City-St-Zip: SANTA ROSA BEACH, FL 32459

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: EMMETT F. HILDRETH, JR.

MGRM

04/10/2008

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