

**FILED**  
**Apr 04, 2005 8:00 am**  
**Secretary of State**

04-04-2005 90431 037 \*\*\*\*55.00

**2005 LIMITED LIABILITY COMPANY  
 ANNUAL REPORT**

40046514



01062005 Chg-LLC CR2E083 (10/03)

4. FEI Number 42-162-5112 Applied For  Not Applicable

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

**DOCUMENT # L04000016705**  
 1. Entity Name  
**PAN DEVELOPMENT, LLC**



Principal Place of Business  
**4400 BAYOU BLVD, STE 52-B  
 PENSACOLA, FL 32503**

Mailing Address  
**P.O. BOX 9469  
 PENSACOLA, FL 32513**

2. Principal Place of Business Suite, Apt. #, etc.  
 3. Mailing Address Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

6. Name and Address of Current Registered Agent  
**DANIEL, JOHN P  
 501 COMMENDENCIA ST  
 PENSACOLA, FL 32502**

7. Name and Address of New Registered Agent

Name Philip Napier

Street Address (P.O. Box Number is Not Acceptable)  
4400 Bayou Blvd., Suite 52-B

City Pensacola FL Zip Code 32503

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 Philip Napier DATE 3/28/05  
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$60.00  
 Due by May 1, 2005**

**Make check payable to  
 Florida Department of State**

9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR NAPIER, PHILIP A 4400 BAYOU BLVD, STE 52-B PENSACOLA, FL 32503 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Philip Napier Date 03/14/05 850-852-1881  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #