

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000017587

FILED
Mar 19, 2009
Secretary of State

Entity Name: COOL WINDS PROPERTIES, LLC

Current Principal Place of Business:

186 BAYSHORE DRIVE
MARIMAR BEACH, FL 32550

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2547
SANTA ROSA BEACH, FL 32459

New Mailing Address:

FEI Number: 20-0845403 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHEYD, JOSEPH M JR
1221 AIRPORT ROAD, SUITE 209
DESTIN, FL 32541 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: MGR () Delete
Name: MCCOOL, WAYNE
Address: 119 SNOWDRIFT ROAD
City-St-Zip: DESTIN, FL 32550

Title: MGR () Delete
Name: WINDES, CHARLES K JR
Address: 787 SPRING LAKE DRIVE
City-St-Zip: DESTIN, FL 32541

Title: MGR () Delete
Name: WINDES, MARY ANNE
Address: 787 SPRING LAKE DRIVE
City-St-Zip: DESTIN, FL 32541

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: WAYNE MCCOOL

MEMB

03/19/2009

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