

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000017806

FILED
Apr 04, 2009
Secretary of State

Entity Name: SOUTH WALTON LAND AND DEVELOPMENT, LLC

Current Principal Place of Business:

605 N. COUNTY HWY 393
UNIT 16-B SUITE 2
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

Current Mailing Address:

PO BOX 1873
SANTA ROSA BEACH, FL 32459 03

New Mailing Address:

FEI Number: 20-0827358

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRANTHAM, ROBERT E SR.
505 MUSSETT BAYOU ROAD
SANTA ROSA BEACH, FL 32459 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: GRANTHAM CONSTRUCTIO, N, INC.
Address: 505 MUSSETT BAYOU ROAD
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: P () Delete
Name: GRANTHAM, ROBERT E SR
Address: 505 MUSSETT BAYOU ROAD
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: S () Delete
Name: GRANTHAM, MICHAEL S
Address: 505 MUSSETT BAYOU ROAD
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: T () Delete
Name: SMITH, ALESIA S
Address: 557 NORTH LAKESHORE DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32413

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:

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: ALESIA S. SMITH

T

04/04/2009

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