### 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT # L04000026754

Entity Name

NWEC DEVELOPMENT, LLC



Principal Place of Business

Mailing Address

655 MCDONOUGH RD HAMPTON, GA 30228

655 MCDONOUGH RD HAMPTON, GA 30228 FILED 07 HAY 18 PM 12: 02



03072007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
42-1625969

Applied For
Not Applicable

5. Certificate of Status Desired
Fee Required
Fee Required

### DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MCNEESE, RICHARD S 36468 EMERALD COAST PARKWAY SUITE 1201 DESTIN, FL 32550

## DO NOT WRITE IN THIS SPACE

	bove named entity submits this statement for the purpose of cha pligations of registered agent.	anging its registered office or registered agent, or both,	in the State of Florida. I am familiar with, and accept	
SIGNATURE				
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE	

#### Filing Fee is \$50.00 Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS		
TITLE	MGRM	
NAME	SCOTT, NORMAN B JR.	
STREET ADDRESS	812 BENTLEY LANE	
CITY-ST-ZIP	NORTH MYRTLE BEACH, SC 29582	
TITLE	MGRM	
NAME	MCMASTER, JAMES R	
STREET ADDRESS	655 MCDONOUGH ROAD	
CITY-ST-ZIP	HAMPTON, GA 30228	
TITLE	MGRM	
NAME	RICHARD, HEDBERG E	
STREET ADDRESS	25 SAM'S POINT LANE	
CITY-ST-ZIP	HILTON HEAD ISLAND, SC 29926	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
11 I hereby certify that the information supplied with this filing does not qualify for the s		

M5/25

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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** 

SIGNATURE AND TYPED OR PRINTED MAME OF SIGNING MANAGING MEMBER, OPHOTHORIZED REPRESENTATIVE

4/26/07

Daytime Phone #