

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000032650

FILED
Jan 05, 2008
Secretary of State

Entity Name: EMERALD SHORES DEVELOPMENT, L.L.C.

Current Principal Place of Business:

190 GULF PINES DR
PORT ST JOE, FL 32456

New Principal Place of Business:

Current Mailing Address:

190 GULF PINES DR
PORT ST JOE, FL 32456

New Mailing Address:

FEI Number: 20-1032332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOULD, PATRICK J
190 GULF PINES DR
PORT ST JOE, FL 32456 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: GOULD, PATRICK J
Address: 190 GULF PINES DRIVE
City-St-Zip: PORT ST. JOE, FL 32456

Title: MGRM () Delete
Name: GOULD, CARLA A
Address: 190 GULF PINES DRIVE
City-St-Zip: PORT ST. JOE, FL 32456

Title: MGRM () Delete
Name: BOWDEN, CHARLES
Address: 7426 JOANNA LANE LN
City-St-Zip: PANAMA CITY, FL 32409

Title: MGRM () Delete
Name: BOWDEN, ANGELA
Address: 7426 JOANNA LANE LN
City-St-Zip: PANAMA CITY, FL 32409

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: PATRICK GOULD

MR.

01/05/2008

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