

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000044413

FILED
Apr 30, 2007
Secretary of State

Entity Name: WALTON COUNTY INVESTMENTS, LLC

Current Principal Place of Business:

181 PINE STREET
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

Current Mailing Address:

181 PINE STREET
SANTA ROSA BEACH, FL 32459

New Mailing Address:

FEI Number: 20-1255224

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COVELL, SCOTT M
181 PINE STREET
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: COVELL, SCOTT M
Address: 181 PINE STREET
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MGRM () Delete
Name: WILLIAMS, KIRBY H
Address: 394 DRIFTWOOD POINT ROAD
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MGRM () Delete
Name: COVELL, WILLIAM R
Address: 2409 GEORGETOWN DRIVE
City-St-Zip: BARTLESVILLE, OK 74006

Title: MGRM () Delete
Name: SILVA, JEAN C
Address: 107 BUNKERS COVE ROAD
City-St-Zip: PANAMA CITY, FL 32401

Title: MGRM () Delete
Name: COVELL, JAMES P
Address: 709 CHESAPEAKE DRIVE
City-St-Zip: GULF BREEZE, FL 32561

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:

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: SCOTT M. COVELL

MGRM

04/30/2007

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