## 2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## Jan 14, 2005 8:00 am **Secretary of State DOCUMENT # L04000046508** 01-14-2005 90038 023 \*\*\*\*50.00 GREÉNWAY PARK LLC Principal Place of Business Mailing Address 3797 INDIAN TRAIL 3797 INDIAN TRAIL 20001928 DESTIN, FL 32541 DESTIN, FL 32541 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01072005 Chg-LLC CR2E083 (10/03) 4. FEI Number Applied For City & State City & State 20-1392015 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HALL, STEVEN K Street Address (P.O. Box Number is Not Acceptable) 4399 COMMONS DRIVE E SUITE 300 DESTIN, FL 32541 Zip Code City 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstalling) Filing Fee is \$50.00 Due by May 1, 2005 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. MGR TITLE ☐ Change □ Addition TITLE ☐ Delete NAME ECOAST LLC NAME STREET ADDRESS 3797 INDIAN TRIAL STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DESTIN, FL 32541 ☐ Chance ☐ Addition TITLE Delete IIII F NAME MARKE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Detete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST- 7IP ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

JRE: Be the H It's Manager of Green way for signature and typed or printed name of signings managing member, manager, or authorized representative

As Manager of Greenway BUFUC

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