

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000053076

FILED  
Mar 21, 2006  
Secretary of State

Entity Name: EMERALD COAST TRANSFER, LLC

## Current Principal Place of Business:

420 OAK HARBOR LANE  
UNIT 201  
DESTIN, FL 32541

## New Principal Place of Business:

3384 HIGHWAY 98 WEST  
SUITE C  
SANTA ROSA BEACH, FL 32459

## Current Mailing Address:

420 OAK HARBOR LANE  
UNIT 201  
DESTIN, FL 32541

## New Mailing Address:

3384 HIGHWAY 98 WEST  
SUITE C  
SANTA ROSA BEACH, FL 32459

FEI Number: 20-1463334

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MCCLENDON, ROBERT BRANCH  
420 OAK HARBOR LANE  
UNIT 201  
DESTIN, FL 32541 US

## Name and Address of New Registered Agent:

MCCLENDON, ROBERT BRANCH  
3384 HIGHWAY 98 WEST  
SUITE C  
SANTA ROSA BEACH, FL 32459 US

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:

03/21/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: MCCLENDON, ROBERT BRANCH  
Address: 420 OAK HARBOR LANE, UNIT 201  
City-St-Zip: DESTIN, FL 32541

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: MCCLENDON, ROBERT BRANCH  
Address: 3384 HIGHWAY 98 WEST  
City-St-Zip: SANTA ROSA BEACH, FL 32459

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT BRANCH MCCLENDON

MGRM

03/21/2006

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