

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 23, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000055962 1. Entity Name E & S PROPERTY, LLC	
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Principal Place of Business 44 COUNTRY CLUB DRIVE, E DESTIN, FL 32541	Mailing Address 44 COUNTRY CLUB DRIVE, E DESTIN, FL 32541
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03072006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 43-2079285	Applied For Not Applicable
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5. Certificate of Status Desired ☒	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent SHUCK, CINDY L 44 COUNTRY CLUB DRIVE, E DESTIN, FL 32541

**DO NOT WRITE
IN THIS SPACE**

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. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
Due by May 1, 2006**

1100000477776
04/07/06-80001-020 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM EASTBURN, JUDITH S 4559 COUNTY RD. 349 ELBA, AL 36323
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM EASTBURN, CHARLES E 4559 COUNTY RD. 349 ELBA, AL 36323
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SHUCK, JOHN R 44 COUNTRY CLUB DRIVE DESTIN, FL 32541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SHUCK, CINDY L 44 COUNTRY CLUB DRIVE DESTIN, FL 32541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

1100000477776
04/07/06-80001-021 5.00

**DO NOT WRITE
IN THIS SPACE**

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 Judith S. Eastburn
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3-16-06 334 897-5999
Date Daytime Phone #