

# **2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000064186

**FILED**  
**Oct 04, 2006**  
**Secretary of State**

**Entity Name:** EMERALD SHORES OF PANAMA CITY BEACH, LLC

**Current Principal Place of Business:**

14324 FRONT BEACH ROAD  
PANAMA CITY BEACH, FL 32413

**New Principal Place of Business:**

**Current Mailing Address:**

344 TURKEYFOOT LAKE ROAD W.  
AKRON, OH 44319

**New Mailing Address:**

P.O. BOX 70  
PANAMA CITY, FL 32402

FEI Number: 20-1563961      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

HUTCHISON, EDWARD A JR.  
221 MCKENZIE AVENUE  
PANAMA CITY, FL 32401      US

**Name and Address of New Registered Agent:**

HUTCHISON, EDWARD A JR.  
221 MCKENZIE AVENUE  
PANAMA CITY, FL 32401      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: EDWARD A. HUTCHISON, JR.

10/04/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: SHAFFER, BARRY L  
Address: 1389 NORVIEW DRIVE  
City-St-Zip: CLINTON, OH 44216

Title: MGRM      (X) Delete  
Name: DAVID COREY TRUST,  
Address: 4042 GREENRIDGE DRIVE  
City-St-Zip: UNIONTOWN, OH 44685

**ADDITIONS/CHANGES:**

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 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: BARRY L. SHAFFER

MGRM

10/04/2006

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