2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED DOCUMENT #L04000071866 06 JUL 18 AM 9:41 SUGAR SANDS ESTATES, LLC SECRETARY OF STATE TALLAHASSEE, FLORIDA Mailing Address Principal Place of Business 10065 WEST EMERALD COAST PARKWAY P.O. BOX 6785 DESTIN, FL 32550 IIS SUITE A 101 DESTIN, FL 32550 2. Principal Place of Business 3. Mailing Address 1727 S. Co. Hwy. 393 Suite, Apt. #, etc. Suite, Apt. #, etc. 07132006 Chg-LLC CR2E083 (11/05) 4. FEI Number Applied For City & State City & State Not Applicable 83-0407977 Santa Rosa Beach, FL Zip Country \$5.00 Additional Country Ζίρ 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent William S. Howell, Jr., President CARTER, JEANNE M Street Address (P.O. Box Number is Not Acceptable) William S. Howell, Jr., J.D. 10065 W. EMERALD COAST PKWY SUITE A101 DESTIN, FL 32550 1727 S. County Hwy. 393 Zip Code Santa Rosa Beach 32459 8. The above named entry 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 SIGNATURE Make check payable to Amended AR is \$50.00 Florida Department of State ADDITIONS/CHANGES MANAGING MEMBERS/MANAGERS 9. 10. MGR 🔀 Change HILE TITLE ☐ Addition MGRM STAR REAL ESTATE GROUP, LLC Star Real Estate Group, LLC 10065 W. Emerald Coast Pkwy., Ste. A101 NAME NAME STREET ADDRESS 10065 W. EMERALD COAST PARKWAY, SUITE A101 STREET ADDRESS Destin, FL 32550 DESTIN, FL 32550 CITY-ST-7P CITY-ST-71P MGRM TITLE X Defete TITEF ☐ Change ☐ Addition NAME OSLAND, GREG NAME **800077959848** 07/25/06--01047--001 **55.00 STREET ADDRESS 1231 RIDGE CREST LANE N.W. STREET ADDRESS CITY-ST-ZIP ROCHESTER, MN 55901 CHTY-ST-ZIP MGRM Delete Change ☐ Addition TITE OFF NAME OSLAND, DIANE 1231 RIDGE CREST LANE N.W. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ROCHESTER, MN 55901 CITY-ST-ZIP MGRM X Delete TITLE Change Addition IIILE 10 DIGITS, LLC NAME NAME STREET ADDRESS 320 HIGHWAY 98, #505 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DESTIN, FL 32541 THIE Delete TITLE MGRM ☐ Change Addition NAME NAME A. Craig LeCrone STREET ADDRESS STREET ADDRESS 912 Blair Street CITY-ST-ZIP CITY-ST-ZIP Hollidaysburg, PA 16648 TITLE ☐ Defete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-\$T-719 CITY-ST-ZIP

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.

R PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

SIGNATURE

7/13/06