

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000073978

Entity Name: WHITE DUNES PROPERTIES LLC

FILED
Jan 05, 2005
Secretary of State

Current Principal Place of Business:

9725 SHADOW WOOD DRIVE
PENSACOLA, FL 32614

New Principal Place of Business:

Current Mailing Address:

9725 SHADOW WOOD DRIVE
PENSACOLA, FL 32614

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WISE, MARK W
9725 SHADOW WOOD DRIVE
PENSACOLA, FL 32614 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: SEBOURIN, JAMES W
Address: 200 PRINCESS TRAIL
City-St-Zip: LOOKOUT MOUNTAIN, GA 30750

Title: MGRM () Delete
Name: WISE, MARK W
Address: 9725 SHADOW WOOD DRIVE
City-St-Zip: PENSACOLA, FL 32614

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SABOURIN, JAMES W
Address: 200 PRINCESS TRAIL
City-St-Zip: LOOKOUT MOUNTAIN, GA 30750

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 Section 119.07(3)(i), 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: MARK W. WISE

MR.

01/05/2005

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