

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 22, 2006 8:00 am
Secretary of State

03-22-2006 90291 045 ****50.00

DOCUMENT # L04000084046

1. Entity Name
DOGI LAND DEVELOPMENT, LLC



Principal Place of Business
**20 SOUTH 4TH STREET
FERNANDINA BEACH, FL 32034**

Mailing Address
**20 SOUTH 4TH STREET
FERNANDINA BEACH, FL 32034**

DO NOT WRITE IN THIS SPACE



03082006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-1866248

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**GILLETTE, NICK E
20 SOUTH 4TH STREET
FERNANDINA BEACH, FL 32034**

**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)

DATE _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MM
GILLETTE, NICK E
20 SOUTH 4TH ST
FERNANDINA BEACH, FL 32034**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MM
DOYLE, WILLIAM A
PO BOX 810
FERNANDINO BEACH, FL 32034**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

3-15-06