

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000084304

FILED
Jun 13, 2008
Secretary of State

Entity Name: PROPERTIES AT CARILLON BEACH INN, LLC

Current Principal Place of Business:

110 GOLF DRIVE
PANAMA CITY BEACH, FL 32408

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 27189
PANAMA CITY, FL 32411

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

ROPA, MICHAEL J
110 GOLF DRIVE
PANAMA CITY BEACH, FL 32408 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/MANAGERS:

Title: MGRM () Delete
Name: ROPA, MIKE
Address: 110 GOLF DRIVE
City-St-Zip: PANAMA CITY, FL 32411

Title: MGRM () Delete
Name: MANER, TOM
Address: 246 MARLIN CIRCLE
City-St-Zip: PANAMA CITY, FL 32411

Title: MGRM () Delete
Name: AMATO, CHARLES
Address: 7021 EBENEZER CHURCH ROAD
City-St-Zip: RALEIGH, NC 27612

Title: MGRM () Delete
Name: MOON, JARAD
Address: 1813 BOWMAN LANE
City-St-Zip: LYNN HAVEN, FL 32444

Title: MGRM () Delete
Name: ROPA, CINDY
Address: 110 GOLF DRIVE
City-St-Zip: PANAMA CITY, FL 32411

Title: MGRM () Delete
Name: MOON, SELENA
Address: 1813 BOWMAN LANE
City-St-Zip: LYNN HAVEN, FL 32444

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Title: () Change () Addition
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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 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: MICHAEL ROPA

MGRM

06/13/2008

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