2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 11, 2005
Secretary of State

DOCUMENT# L04000086642

Entity Name: INLET HEIGHTS, LLC

Current Principal Place of Business:

12273 EMERALD COAST PARKWAY
SUITE 204
DESTIN, FL 32550

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 456
DESTIN, FL 32540

New Mailing Address:

FEI Number: 20-1947044 **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:

HALL, STEVEN K
4399 COMMONS DRIVE EAST
SUITE 300
DESTIN, FL 32541 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:	BARTON, JAMES L	
Address:	12273 EMERALD COAST PARKWAY, STE. 204	
City-St-Zip:	DESTIN, FL 32550	
Title:	MGR	( ) Delete
Name:	SPEARS, TIMOTHY D	
Address:	12273 EMERALD COAST PARKWAY, STE. 204	
City-St-Zip:	DESTIN, FL 32550	
Title:	MGR	( ) Delete
Name:	MAINOR, JAMES B	
Address:	12273 EMERALD COAST PARKWAY, STE. 204	
City-St-Zip:	DESTIN, FL 32550	
Title:	MGR	( ) Delete
Name:	BINKLEY, ROSS S	
Address:	12273 EMERALD COAST PARKWAY, STE. 204	
City-St-Zip:	DESTIN, FL 32550	
Title:	MGR	( ) Delete
Name:	GUSTIN, JOHN C IV	
Address:	12273 EMERALD COAST PARKWAY, STE. 204	
City-St-Zip:	DESTIN, FL 32550	
Title:	MGR	( ) Delete
Name:	GUSTIN, SHANNON J	
Address:	12273 EMERALD COAST PARKWAY, STE. 204	
City-St-Zip:	DESTIN, FL 32550	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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: ROSS BINKLEY MGR 05/11/2005

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