

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000093801

FILED
Jul 08, 2005
Secretary of State

Entity Name: CHICKASAW DEVELOPMENT, LLC

Current Principal Place of Business:

2240 WHISPERING PINE LANE
MCDONOUGH, GA 30253 US

New Principal Place of Business:

110 EAGLE SPRING DRIVE
SUITE D
STOCKBRIDGE, GA 30281 US

Current Mailing Address:

2240 WHISPERING PINE LANE
MCDONOUGH, GA 30253 US

New Mailing Address:

110 EAGLE SPRING DRIVE
SUITE D
STOCKBRIDGE, GA 30281 US

FEI Number: 20-2127588 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:

HARRISON, RIVARD, ZIMMERMAN & BENNETT CHTD
109 HARRISON AVENUE
PANAMA CITY, FL 32401 US

Name and Address of New Registered Agent:

ARLINE, TODD
8017 THOMAS DRIVE
PANAMA CITY BEACH, FL 32408 US

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: TODD ARLINE

07/08/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BONNER, DOUG
Address: 2240 WHISPERING PINE LANE
City-St-Zip: MCDONOUGH, GA 30253 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BONNER, DOUG
Address: 110 EAGLE SPRING DRIVE, SUITE D
City-St-Zip: STOCKBRIDGE, GA 30281 US

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: DOUG BONNER

MGR

07/08/2005

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