2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 20, 2008 8:00 am
Secretary of State
05-20-2008 90054 002 ***138.75

DOCUMENT # L05000011673

1. Entity Name
HIGH TIDE DEVELOPEMENT LLC

60042344

Principal Place of Business	Mailing Address
510 6TH STREET PORT ST JOE, FL 32456	510 6TH STREET PORT ST JOE, FL 32456

05132008 Chg-LLC CR2E083 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
1710 WAHOO CIRCLE	P.O. Box 27955
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: PANAMA CITY BEACH, FL	City & State: PANAMA CITY BEACH, FL
Zip: 32408 Country: USA	Zip: 32411 Country: USA

4. FEI Number: 20-2631800 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ACREE, CLEVELAND R 510 6TH STREET PORT ST JOE, FL 32456	Name: ROBERT W. DAVIS, JR Street Address (P.O. Box Number is Not Acceptable): 1710 WAHOO CIRCLE City: PANAMA CITY BEACH FL Zip Code: 32408

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: RWD MGR 5/13/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $138.75 **Due by September 12, 2008**	In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.	**Make check payable to Florida Department of State**

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR ACREE, CLEVELAND R 510 6TH STREET PORT ST JOE, FL 32456	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR CAMPBELL, SETH T 510 6TH STREET PORT ST JOE, FL 32456	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR DAVIS, ROBERT W JR 1309 GRACE AVE. PANAMA CITY, FL 32401	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: RWD 5/13/08 8503034595
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #