

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000013702

1. Entity Name

NAVARRE BEACH HOLDINGS, LLC



FILED Mar 13, 2008 08:00 AN Secretary of State

Principal Place of Business

36008 EMERALD COAST PARKWAY

SUITE 301

DESTIN, FL 32541 US

Mailing Address

36008 EMERALD COAST PARKWAY

SUITE 301

DESTIN, FL 32541 US



03062008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number	Applied For
20-2305031	Not Applicable
	- \$5.00 Additional

5. Certificate of Status Desired

Fee Required

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6.	Name	and Address	of Curre	nt Registered	l Acent

MCGILL, ROBERT E III 36008 EMERALD COAST PARKWAY SUITE 301 DESTIN, FL 32541

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	named entity submits this statement for the purpose of changions of registered agent.	ing its registered office or reg	gistered agent, or both, in the Stat	e of Flonda. I am familiar with, and accept
SIGNATURE.				
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature re	equired when reinstating)	DATE
	NOWIII FEE IS \$138.75 y 1, 2008 Fee will be \$538.75		U000 03/28/	000856769 08-80025-011 138.75
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MCGILL, ROBERT E III 36008 EMERALD COAST PARKWAY SUITE 301 DESTIN, FL 32541			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT	WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS	SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3/6/08

850-837677

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