2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

Mar 16, 2006 8:00 am Secretary of State DOCUMENT # L05000022646 1. Entity Name 03-01-2006 90228 012 ****50.00 KRYSTLE TOWERS DEVELOPERS, LLC Principal Place of Business Mailing Address 727 HIGHWAY 98 EAST DESTIN FL 32541 727 HIGHWAY 98 EAST DESTIN FL 32541 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #. etc. CR2E083 (10/05) 1st MOORE City & State City & State 4. FEI Number Applied For 20-2480416 Not Applicable 2ip Country Country \$5.00 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **BURKE, LES W ESQ** Street Address (P.O. Box Number is Not Acceptable) BURKE BLUE HUTCHISON & WALTERS, P.A. 221 MKENZIE AVENUE PANAMA CITY FL 32401 City Zip Code 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 Squalure, typist or prefed name of registered agent and tide 4 applicable FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2006 MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES TITLE MGR ☐ Delete TITLE ☐ Change ☐ Addition NAME SCHINZ, F.W. "FREDDIE" NAME STREET ADDRESS 727 HIGHWAY 98 EAST STREET ADDRESS CITY-ST-ZIP DESTIN FL 32541 CITY - S1 - 7:P TITLE Delete TITLE ☐ Change Addition NAME NALE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-7IP CITY-ST-ZIP TITLE TITLE ☐ Detete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TILE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 species or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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LE OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZ

SIGNATURE:

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FILED



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 3, 2006

KRYSTLE TOWERS DEVELOPERS, LLC 727 HIGHWAY 98 EAST DESTIN, FL 32541

Subject: KRYSTLE TOWERS DEVELOPERS, LLC

Reference Number:

L05000022646

20-2480416

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/mh ANNUAL REPORTS SECTION