

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000030249

FILED
May 07, 2007
Secretary of State

Entity Name: HURRICANES OF DESTIN, LLC

Current Principal Place of Business:

535 STAHLMAN AVENUE
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

535 STAHLMAN AVENUE
DESTIN, FL 32541

New Mailing Address:

FEI Number: 51-0563920 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:

Name and Address of New Registered Agent:

TINGLE, D. CRAIG ESQUIRE
535 STAHLMAN AVENUE
DESTIN, FL 32541 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TINGLE, D. CRAIG ESQUIRE
Address: 535 STAHLMAN AVENUE
City-St-Zip: DESTIN, FL 32541

Title: MGR (X) Delete
Name: LEVY, SAM
Address: 284 KETCH COURT
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES:

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 exemption stated in Chapter 119, 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: D. CRAIG TINGLE

MGRM

05/07/2007

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