

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000034764

FILED
Feb 08, 2007
Secretary of State

Entity Name: CARRABELLE BEACH LLC

Current Principal Place of Business:

3955 JOHNS CREEK COURT
SUWANEE, GA 30024 US

New Principal Place of Business:

6465 EAST JOHNS CROSSING
JOHNS CREEK, GA 30097 US

Current Mailing Address:

200 GALLERIA PARKWAY
SUITE 500
ATLANTA, GA 30339 US

New Mailing Address:

C/O MERRITT & TENNEY LLP
200 GALLERIA PARKWAY, SUITE 500
ATLANTA, GA 30339 US

FEI Number: 20-2935866

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: FANN, ELLIOTT
Address: 235 WEST GULF BEACH DRIVE
City-St-Zip: ST. GEORGE ISLAND, FL 32328 US

Title: MGRM () Delete
Name: WLC HOLDINGS LLC,
Address: 3955 JOHNS CREEK COURT
City-St-Zip: SUWANEE, GA 30024 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: WLC HOLDINGS LLC,
Address: P. O. BOX 160
City-St-Zip: DULUTH, GA 30096 US

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES F. TENNEY

ATTY

02/08/2007

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