

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Mar 12, 2007 08:00 AM
Secretary of State**

DOCUMENT # L05000038326

**1. Entity Name
SUNDANCE PROPERTIES EMERALD COAST, LLC**



**Principal Place of Business
1194 GRAND POINTE DRIVE
GULF BREEZE, FL 32563**

**Mailing Address
1194 GRAND POINTE DRIVE
GULF BREEZE, FL 32563**



03102007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

**4. FEI Number
87-0755899**

**Applied For
Not Applicable**

5. Certificate of Status Desired



**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SILVER, RUSSELL E
1194 GRAND POINTE DRIVE
GULF BREEZE, FL 32563**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
Due by May 1, 2007**

**000000664729
03/22/07-80055-019 55.00**

9. MANAGING MEMBERS/MANAGERS

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
SILVER, RUSSELL E
1194 GRAND POINTE DRIVE
GULF BREEZE, FL 32563**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
SILVER, ANN J
1194 GRAND POINTE DRIVE
GULF BREEZE, FL 32563**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**DO NOT WRITE
IN THIS SPACE**

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:

Russell E Silver

3/1/07

850.572.3530

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #