

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000047630

**FILED**  
**Apr 21, 2006**  
**Secretary of State**

**Entity Name:** OLD GROVE HOLDINGS, L.L.C.

**Current Principal Place of Business:**

101 A BUSINESS CENTRE DR.  
DESTIN, FL 32550

**New Principal Place of Business:**

1008 AIRPORT ROAD  
SUITE C  
DESTIN, FL 32541

**Current Mailing Address:**

101 A BUSINESS CENTRE DR.  
DESTIN, FL 32550

**New Mailing Address:**

1008 AIRPORT ROAD  
SUITE C  
DESTIL, FL 32541

**FEI Number:** 20-2863526

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEUCHTMAN, GARY B  
501 COMMENDENCIA STREET  
PENSACOLA, FL 32502 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: GILLILAND, MICHAEL C  
Address: 1008 AIRPORT ROAD, SUITE C  
City-St-Zip: DESTIN, FL 32541

Title: MGRM ( ) Change (X) Addition  
Name: EDWARDS, BENJAMIN C  
Address: 1008 AIRPORT ROAD, SUITE C  
City-St-Zip: DESTIN, FL 32541

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:** M. CHAD GILLILAND

MGRM

04/21/2006

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