2006 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 22, 2006
Secretary of State

DOCUMENT# L05000047800

Entity Name: CRAWFORD-MCBRIDE DEVELOPMENT LLC

Current Principal Place of Business:

2415 NORTH PACE BLVD., SUITE 5
PENSACOLA, FL 32505

New Principal Place of Business:

Current Mailing Address:

2415 NORTH PACE BLVD., SUITE 5
PENSACOLA, FL 32505

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **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:

CRAWFORD, JOHNNY C SR
1444 WATKINS TRAIL
PENSACOLA, FL 32506 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: JOHNNY C. CRAWFORD

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: CRAWFORD, JOHNNY C SR
Address: 1444 WATKINS TRAIL
City-St-Zip: PENSACOLA, FL 32506

Title: MGRM ( ) Delete
Name: MCBRIDE, WILLIAM C
Address: 320 WEST LLOYD STREET
City-St-Zip: PENSACOLA, FL 32501

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 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: JOHNNY C. CRAWFORD MGRM 10/22/2006

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