

**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000047927

**FILED  
Jul 17, 2007  
Secretary of State**

**Entity Name:** PROPERTIES AT CARILLON BEACH INN #312, LLC

**Current Principal Place of Business:**

P.O. BOX 27189  
PANAMA CITY, FL 32411 US

**New Principal Place of Business:**

110 GOLF DRIVE  
PANAMA CITY, FL 32408 US

**Current Mailing Address:**

P.O. BOX 27189  
PANAMA CITY, FL 32411 US

**New Mailing Address:**

**FEI Number:**  **FEI Number Applied For ( )**  **FEI Number Not Applicable (X)**  **Certificate of Status Desired (X)**  
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:**

ROPA, MICHAEL J  
110 GOLF DRIVE  
BOX 27189  
PANAMA CITY, FL 32411 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:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: PROPERTIES AT CARILL, ON BEACH INN, L LC  
Address: 2411 PELICAN BAY COURT  
City-St-Zip: PANAMA CITY BEACH, FL 32408 US

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: MICHAEL ROPA

MGRM

07/17/2007

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