

# 2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT # L05000051778

1. Entity Name  
MACK BAYOU DEVELOPMENT CO., LLC



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

06 MAY -1 AM 8:57

Principal Place of Business  
1016 AIRPORT RD  
UNIT #4  
DESTIN, FL 32541

Mailing Address  
1016 AIRPORT RD  
UNIT #4  
DESTIN, FL 32541

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

05022006 Chg-LLC CR2E083 (11/05)

4. FEI Number  
20-4563978

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MONSEES, SHELLEY  
1016 AIRPORT RD  
UNIT #4  
DESTIN, FL 32541

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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)

DATE

Amended AR is \$50.00

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
R & S HYATT FAMILY LIMITED PARTNERSHIP  
4360 STONEBRIDGE RD.  
DESTIN, FL 32541 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Mr Robert Donovan Construction  
1016 Airport Rd Unit #4  
Destin, FL 32541 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
400075294711  
04/25/06--90278--002 \*\*50.00 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
100075294711  
05/26/06--01003--002 \*\*50.00 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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: *James D Monsees*

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

5/2/06

Date

850-424-6182

Daytime Phone #