

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 26, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000068232

1. Entity Name
PLAYAS VERDES II, LLC



Principal Place of Business
12469 US HIGHWAY 98
#104
MIRAMAR BEACH, FL 32550

Mailing Address
12469 US HIGHWAY 98
#104
MIRAMAR BEACH, FL 32550



DO NOT WRITE IN THIS SPACE

07122007No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-4643934

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

CHESSER, MICHAEL ESQ
1201 EGLIN PARKWAY
SHALIMAR, FL 32579

**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 reappointing)

DATE _____

**Filing Fee is \$50.00
Due by September 14, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	DESTIN WINDS I, LLC
STREET ADDRESS	12469 US HIGHWAY 98 STE 104
CITY - ST - ZIP	MIRAMAR BEACH, FL 32550

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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CITY - ST - ZIP	

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07/26/07-80005-012 50.00

**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: _____

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

(PSO)
7-17-07 598-0454

Date

Daytime Phone #