## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000071672

City-St-Zip:

Entity Name: SALTWATER DEVELOPMENT, LLC

FILED Apr 29, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 12111 PANAMA CITY BEACH PARKWAY PANAMA CITY BEACH, FL 32407 **Current Mailing Address: New Mailing Address:** 12111 PANAMA CITY BEACH PARKWAY PANAMA CITY BEACH, FL 32407 FEI Number: 20-4532598 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SALE, RALEIGH P 12111 PANAMA CITY BEACH PARKWAY PANAMA CITY BEACH, FL 32407 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: () Delete ( ) Change (X) Addition Name: Name: SALE, RALEIGH P MGRM Address: Address: 1301 MASSACHUSETTS AVE. LYNN HAVEN, FL 32444 City-St-Zip: City-St-Zip: Title: Title: MGRM ( ) Change (X) Addition ( ) Delete Name: Name: MCKENZIE, NEIL MGRM Address: Address: 1501 NEW JERSEY AVE. City-St-Zip: City-St-Zip: LYNN HAVEN, FL 32444 Title: () Delete Title: MGRM ( ) Change (X) Addition MCRAE, PATRICK MGRM Name: Name: Address: Address: 1105 NEW JERSEY AVE. City-St-Zip: City-St-Zip: LYNN HAVEN, FL 32444 Title: () Delete Title: MGRM ( ) Change (X) Addition Name: Name: WELCH, JASON MGRM Address: Address: 357 MERCEDES AVE. City-St-Zip: City-St-Zip: PANAMA CITY, FL 32401 Title: () Delete Title: MGRM ( ) Change (X) Addition DOOLITTLE, MORGAN MGRM Name: Name: 334 MERCEDES AVE Address: Address: City-St-Zip: City-St-Zip: PANAMA CITY, FL 32401 Title: () Delete Title: ( ) Change (X) Addition NOLTE, ERIK MGRM Name: Name: Address: Address: 1705 MINNESOTA AVE

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.

City-St-Zip:

LYNN HAVEN, FL 32444

SIGNATURE: RALEIGH P. SALE MGRM 04/29/2006