
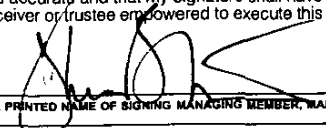


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 09, 2006 8:00 am
Secretary of State

03-09-2006 90003 021 ****50.00

DOCUMENT # L05000074695 1. Entity Name MARTIN MANAGEMENT COMPANY, LLC					
Principal Place of Business ONE BEACH CLUB DRIVE SAN DESTIN RESORT #1403 MIRAMAR BEACH, FL 32250			Mailing Address ONE BEACH CLUB DRIVE SAN DESTIN RESORT #1403 MIRAMAR BEACH, FL 32250		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country			3. Mailing Address Suite, Apt. #, etc. City & State Zip Country		
4. FEI Number 20-3175932			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$5.00 Additional Fee Required		
6. Name and Address of Current Registered Agent MARTIN, THOMAS B ONE BEACH CLUB DRIVE SAN DESTIN RESORT #1403 MIRAMAR BEACH, FL 32250			7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MARTIN, THOMAS B TRUSTEE ONE BEACH CLUB DRIVE MIRAMAR BEACH, FL 32250	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MARTIN, KATHERINE B TRUSTEE ONE BEACH CLUB DRIVE MIRAMAR BEACH, FL 32250	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
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, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date 2/22/06 Daytime Phone #		

Husch &
Eppenger, LLC

Attorneys and Counselors at Law

816.283.4619 direct dial

Joseph.Growney@Husch.com

ATTACHMENT

20614380

#L05000074695

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www.husch.com

March 2, 2006

Divisions of Corporations
P.O. Box 6478
Tallahassee, FL 32314

Re: 2006 Limited Liability Company Annual Report
FEI Number 20-3175932

Dear Ladies or Gentlemen:

Enclosed for filing is the 2006 Annual Report regarding the above referenced Limited Liability Company.

Further enclosed is a check in the amount of \$50.00 to cover the cost of filing the Annual Report. If you have any questions, please feel free to contact me at your convenience.

Sincerely yours,
HUSCH & EPPENBERGER, LLC

By:


Joseph D. Growney

JDG/rjv
Enclosure