

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000090712

FILED
Jan 09, 2006
Secretary of State

Entity Name: NEPTUNE BEACH PROPERTIES, LLC

Current Principal Place of Business:

200 SOLANA ROAD
SUITE A
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

200 SOLANA ROAD
SUITE A
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

FEI Number: 20-3475258

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WORRELL, DANNY L
200 SOLANA ROAD
SUITE C
PONTE VEDRA BEACH, FL 32082 US

Name and Address of New Registered Agent:

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:

Title: MGRM () Delete
Name: SKAFF, PAMELA J DDS
Address: 19 LAVISTA DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: MGRM () Delete
Name: WEEKS, PENNEY L DMD
Address: 4426 SEABREEZE DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32250

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Change (X) Addition
Name: WORRELL, DANNY L
Address: 19 LA VISTA DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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.

SIGNATURE: DANNY WORRELL

MGRM

01/09/2006

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