2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 06, 2006
Secretary of State

DOCUMENT# L05000121916

Entity Name: ATLAS CUSTOM HOMES & DEVELOPMENT OF NORTHWEST FLORIDA, LLC

Current Principal Place of Business:

2603 EDMUND DR.
GULF BREEZE, FL 32563 US

New Principal Place of Business:

Current Mailing Address:

2603 EDMUND DR.
GULF BREEZE, FL 32563 US

New Mailing Address:

FEI Number: 20-3982848 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EVERS, KIM E
2603 EDMUND DR.
GULF BREEZE, FL FL 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: MGR ( ) Delete
Name: EVERS, KIM E
Address: 2603 EDMUND DR.
City-St-Zip: GULF BREEZE, FL 32563 US

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

ADDITIONS/CHANGES:

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

Title: MGR ( ) Change (X) Addition
Name: EVERS, JACOB S
Address: 2603 EDMUND DR
City-St-Zip: GULF BREEZE, FL 32563 US

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: KIM E. EVERS MGR 01/06/2006

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