

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000035570

FILED
Apr 09, 2009
Secretary of State

Entity Name: BOHLERT-MASSEY HOME DESTIN, LLC

Current Principal Place of Business:

1701 SOUTH COUNTY HWY. 393
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

790 N. COUNTY HWY 393
BLDG. #3, SUITE A
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

112 SHEFFIELD LOOP
HATTIESBURG, MS 39402

New Mailing Address:

FEI Number: 20-8440712 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YORK-LOSEE, PAIGE
1701 SOUTH COUNTY HWY. 393
SANTA ROSA BEACH, FL 32459 US

Name and Address of New Registered Agent:

YORK-LOSEE, PAIGE
790 N. COUNTY HWY. 393
BLDG. #3, SUITE A
SANTA ROSA BEACH, FL 32459 US

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:

04/09/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: YORK-LOSEE, PAIGE
Address: 1701 SOUTH COUNTY HWY. 393
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MGRM (X) Delete
Name: MASSEY, JEFF
Address: 1701 SOUTH COUNTY HWY. 393
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MGR (X) Delete
Name: MASSEY, SUSAN
Address: 1701 SOUTH COUNTY HWY. 393
City-St-Zip: SANTA ROSA BEACH, FL 32459

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: YORK-LOSEE, PAIGE
Address: 790 N. COUNTY HWY. 393
City-St-Zip: BLDG. #3, SUITE A, FL 32459

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

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

I hereby certify that the information supplied with this filing does not qualify 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: PAIGE YORK-LOSEE

MGR

04/09/2009

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