2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000043150

Entity Name: BUCKHORN DEVELOPMENT, LLC

FILED Apr 11, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

401 CECIL G. COSTIN SR. BLVD. PORT ST. JOE, FL 32456 US

Current Mailing Address: New Mailing Address:

401 CECIL G. COSTIN SR. BLVD. 8930 BAY LANE

PORT ST. JOE, FL 32456 US GAINESVILLE, GA 30506 US

FEI Number: 03-0591735 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:

GROOM, PAUL W II SMILEY, WILLIAM J

116 SAILOR'S COVE DR.

PORT ST. JOE, FL 32456 US

401 CECIL G. COSTIN, SR. BLVD
PORT ST JOE, FL 32456 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: WILLIAM J. SMILEY 04/11/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 SMILEY, WILLIAM J
 Name:

 Address:
 401 CECIL G. COSTIN SR. BLVD.
 Address:

 City-St-Zip:
 PORT ST. JOE, FL 32456 US
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 GRAVITT, REX E
 Name:

 Address:
 8930 BAY LANE
 Address:

 City-St-Zip:
 GAINESVILLE, GA 30506 US
 City-St-Zip:

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: WILLIAM J. SMILEY MGRM 04/11/2007