

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000000803

Entity Name: NW FLORIDA PROPERTIES, LLC

FILED
Feb 23, 2007
Secretary of State

Current Principal Place of Business:

POST OFFICE BOX 5499
DESTIN, FL 32540

New Principal Place of Business:

4737 PAPAYA PARK
DESTIN, FL 32540 US

Current Mailing Address:

4737 PAPAYA PARK
DESTIN, FL 32541

New Mailing Address:

4737 PAPAYA PARK
DESTIN, FL 32541 US

FEI Number: 59-3561230

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HELMICH, KEVIN M ESQUIRE
4481 LEGENDARY DRIVE
SUITE 200
DESTIN, FL 32541 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: HELMICH, KEVIN M
Address: POST OFFICE BOX 5499
City-St-Zip: DESTIN, FL 32540

Title: MGRM () Delete
Name: BOWYER, KEVIN
Address: 36474 EMERALD COAST PARKWAY, SUITE 1201
City-St-Zip: DESTIN, FL 32541

Title: MGRM () Delete
Name: DAVID, DON
Address: 4737 PAPAYA PARK
City-St-Zip: DESTIN, FL 32541

Title: MGRM () Delete
Name: SMITH, GREGORY
Address: 15 NORTH EGLIN PARKWAY
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: MGRM () Delete
Name: WARD, MICHAEL
Address: 21 LINWOOD DR
City-St-Zip: FORT WALTON BEACH, FL 32547

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HELMICH, KEVIN M
Address: POST OFFICE BOX 5499
City-St-Zip: DESTIN, FL 32540 US

Title: MGRM (X) Change () Addition
Name: BOWYER, KEVIN
Address: 36474 EMERALD COAST PARKWAY, SUITE 1201
City-St-Zip: DESTIN, FL 32541 US

Title: MGRM (X) Change () Addition
Name: DAVID, DON
Address: 4737 PAPAYA PARK
City-St-Zip: DESTIN, FL 32541 US

Title: MGRM (X) Change () Addition
Name: SMITH, GREGORY
Address: 15 NORTH EGLIN PARKWAY
City-St-Zip: FORT WALTON BEACH, FL 32548 US

Title: MGRM (X) Change () Addition
Name: WARD, MICHAEL
Address: 21 LINWOOD DR
City-St-Zip: FORT WALTON BEACH, FL 32547 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: KEVIN M. HELMICH

MGRM

02/23/2007

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