2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 16, 2004 08:00 AM Secretary of State

| DOCUMENT # L9900005372 1. Entity Name RICKY WIGGINS HOMES, L.L.C. | | |
|--|---|--|
| Principal Place of Business 17 SOUTH PALAFOX STREET, SUITE 394 PENSACOLA, FL 32582 | Mailing Address P.O. BOX 3263 PENSACOLA, FL 32516 | |



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

04072004 No Chg-LLC CR2E083 (10/03)

4. FEI Number Applied For 59-3617280 Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

BAKER, RICHARD R 84 BAYBRIDGE

GULF BREEZE, FL 32561

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

| 8. 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. I am familiar with, and accept the obligations of registered agent, | | | | | |
|--|--|--------------------|--|---|--|
| SIGNATURE | | | <u> </u> | · · · · · · · · · · · · · · · · · · · | |
| | Signature, typed or printed name of registered agent and little if applicable. | (NOTE, Registored | Agent signature required when reinstating) | DATE | |
| | ling Fee is \$50.00 ue by May 1, 2004 | ب | | U00000116784 04/16/04-80079-012 150.00 | |
| 9. | MANAGING MEMBERS/MANAGERS | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR WALTON, GARRETT W 971 WOODBINE DRIVE PENSACOLA, FL 32503 | ė, ir ir ir | - | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR BAKER, RICHARD R 84 BAYBRIDGE GULF BREEZE, FL 32561 | | | | |
| title Name Street audress City-St-Zep | | ' <u>i</u> ≨_ | DO | NOT WRITE | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | IN ' | THIS SPACE | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | |
| 11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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. | | | | | |