FILED 2005 LIMITED LIABILITY COMPANY Mar 08, 2005 08:00 AM **ANNUAL REPORT Secretary of State** DOCUMENT # M00000002361 1. Entity Name HEAD COMPANIES, L.L.C. Principal Place of Business Mailing Address

POINT CLEAR, AL 36564	POINT CLEAR, AL 36564	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

18300 SCENIC HIGHWAY 98, SUITE B

the obligations of registered agent.

5. Certificate of Status Desired		\$5.00 Additional Fee Required	
<u>63-1110057</u>	-	Not Applicable	
4. FEI Number	Applied For		

CR2E083 (10/03)

02232005 No Chg-LLC

SHELL, STEPHEN B 226 PALAFOX PLACE, NINTH FLOOR	-	DO NOT WRITE
PENSACOLA, FL 32501		IN THIS SPACE

18300 SCENIC HIGHWAY 98, SUITE B

SIGNATURE	Signature, typed of printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstaling)	DATE
F	iling Fee is \$50.00 ue by May 1, 2005	(POTE, Indignated Agent organization accurate when the soundary)	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGR HEAD, DAVID H 18300 SCENIC HIGHWAY 98, SUITE B POINT CLEAR, AL 36564		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U00000255430 03/08/05-80014-009 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	could that the information is unalled with this filling does not o		

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

indicated on this report is true and accur limited liability company or the receiver of go with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida statutes, i futner certify that the little file and that mys signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the trustee employered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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