

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 10, 2006 08:00 AM
Secretary of State

DOCUMENT # M04000002775

1. Entity Name

FLOWERS PROPERTIES, LLC



Principal Place of Business

2431 WEST MAIN STREET SUITE 202
DOTHAN, AL 36301

Mailing Address

2431 WEST MAIN STREET SUITE 202
DOTHAN, AL 36301



02272006 No Chg-LLC

CR2E093 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1313720

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

HEDBAWNY, WILLIAM M
137 GRAND LAGOON SHORES DRIVE
PANAMA CITY BEACH, FL 32408

**DO NOT WRITE
IN THIS SPACE**

6. 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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when name(s) change)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	FLOWERS, J. MCDAVID
STREET ADDRESS	2431 WEST MAIN STREET SUITE 202
CITY-STATE-ZIP	DOTHAN, AL 36301
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
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CITY-STATE-ZIP	
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CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

1000000461802
03/21/06-80014-013 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 a limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE:

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

Date

Daytime Phone #