2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 28, 2006 8:00 am
Secretary of State
03-28-2006 90012 002 ****50.00

DOCUMENT # M04000003909

1. Entity Name
FORT WALTON DEVELOPMENT, LLC

Principal Place of Business	Mailing Address
400 S. TRYON STREET, SUITE 1300 CHARLOTTE, NC 28202	400 S. TRYON STREET, SUITE 1300 CHARLOTTE, NC 28202

DO NOT WRITE IN THIS SPACE

03092006 No Chg-LLC CR2E083 (11/05)

4. FEI Number
20-1616311
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2006

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	WEBB, H. THOMAS III
STREET ADDRESS	400 S. TRYON STREET, SUITE 1300
CITY-ST-ZIP	CHARLOTTE, NC 28202
TITLE	MGR
NAME	FIELDS, ARTHUR W
STREET ADDRESS	400 S. TRYON STREET, SUITE 1300
CITY-ST-ZIP	CHARLOTTE, NC 28202
TITLE	MGR
NAME	MCGEE, R. WAYNE
STREET ADDRESS	400 S. TRYON STREET, SUITE 1300
CITY-ST-ZIP	CHARLOTTE, NC 28202
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: R. Wayne McGee R. Wayne McGee 3.16.06 704-382-1711
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #