

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Feb 20, 2006 8:00 am**  
**Secretary of State**

02-20-2006 90143 035 \*\*\*\*50.00

**DOCUMENT # M05000001028**

**1. Entity Name**  
**HEAD PROPERTIES, LLC**



**Principal Place of Business**  
18300 SCENIC HIGHWAY 98, SUITE B  
POINT CLEAR, AL 36564

**Mailing Address** *P.O. Box 230*  
~~18300 SCENIC HIGHWAY 98, SUITE B~~  
POINT CLEAR, AL 36564

**20009140**



**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01102006 Chg-LLC CR2E083 (11/05)

City & State

City & State

**4. FEI Number**  
*20-1859429*

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

SHELL, STEPHEN B  
SHELL, FLEMING, DAVIS AND MENGE  
226 PALAFOX PLACE, 9TH FLOOR  
PENSACOLA, FL 32502

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

**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**

**Make check payable to  
Florida Department of State**

**9. MANAGING MEMBERS/MANAGERS**

**10. ADDITIONS/CHANGES**

TITLE MGR ☐ Delete  
NAME HEAD, DAVID H SR  
STREET ADDRESS 18300 SCENIC HIGHWAY 98, SUITE B  
CITY-ST-ZIP POINT CLEAR, AL 36564

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE MGR ☐ Delete  
NAME HEAD, DAVID H JR  
STREET ADDRESS 18300 SCENIC HIGHWAY 98, SUITE B  
CITY-ST-ZIP POINT CLEAR, AL 36564

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE MGR ☐ Delete  
NAME LEFFARD, DAVID  
STREET ADDRESS 18300 SCENIC HIGHWAY 98, SUITE B  
CITY-ST-ZIP POINT CLEAR, AL 36564

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**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:** *[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

*2/2/06*  
Date

*(251) 928-3930*  
Daytime Phone #