

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000000972

**FILED**  
**Apr 03, 2009**  
**Secretary of State**

**Entity Name:** EMERALD COAST DELI'S, L.L.C.

**Current Principal Place of Business:**

10859 EMERALD COAST PKWY WEST  
SUITE 105  
DESTIN, FL 32550 US

**New Principal Place of Business:**

199 BUCK RD.  
SANTA ROSA BEACH, FL 32459 US

**Current Mailing Address:**

P O BOX 6854  
DESTIN, FL 32550 US

**New Mailing Address:**

FEI Number: 59-3620099      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BEYER, DAVID A  
C/O DLA PIPER US LLP  
100 NORTH TAMPA STREET, SUITE 2200  
TAMPA, FL 33602 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: MCQUILLAN, WILLIAM P MANAGER  
Address: 199 BUCK RD.  
City-St-Zip: SANTA ROSA BEACH, FL 32459

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: WILLIAM P MCQUILLAN      MGR      04/03/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date