


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 03, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000003397
 1. Entity Name
 PRIME COASTAL PROPERTIES, LLC



Principal Place of Business Mailing Address
 616 N. TAMiami TRAIL, STE. C 616 N. TAMiami TRAIL, STE. C
 NOKOMIS, FL 34275 NOKOMIS, FL 34275

DO NOT WRITE IN THIS SPACE



04302006No Chg-LLC CR2E083 (11/05)
 4. FEI Number Applied For
 04-3628683 Not Applicable
 5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent
 LEUCHTMAN, GARY B
 3 WEST GARDEN ST., STE. 700
 PENSACOLA, FL 32501

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

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST COGGIN, GERALD C 616 N. TAMiami TRAIL STE D NOKOMIS, FL 34275
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 05/19/06-80018-016 55.00

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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: *Gerald C. Coggin* 5/1/2006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #