

**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 29, 2005 8:00 am**  
**Secretary of State**

04-29-2005 90035 010 \*\*\*\*50.00

**DOCUMENT # L03000014340**  
 1. Entity Name  
**COASTAL BUSINESS CONSULTANTS, LLC**



Principal Place of Business 2033 MAIN STREET SUITE 201 SARASOTA, FL 34237 US	Mailing Address 2033 MAIN STREET SUITE 201 SARASOTA, FL 34237 US
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**DO NOT WRITE IN THIS SPACE**



04242005No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-1183659	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

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

VAN WIE, ROGER H  
 5214 AVENIDA DEL MARE  
 SARASOTA, FL 34242

**DO NOT WRITE IN THIS SPACE**

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

**Filing Fee is \$50.00  
 Due by May 1, 2005**

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR VAN WIE, ROGER H 5214 AVENIDA DEL MARE SARASOTA, FL 34242
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:** Roger H Van Wie 4/27/05  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #