2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000017236

1. Entity Name
PPH&G COASTAL PROPERTIES A, LLC

Principal Place of Business	Mailing Address
32 RIVER PARK DR., N. PALM COAST, FL 32137	32 RIVER PARK DR., N. PALM COAST, FL 32137

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03292006No Chg-LLC CR2E083 (11/05)

4. FEI Number
51-0465745

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

GUIGLOTTO, ANTHONY
32 RIVER PARK DR., N.
PALM COAST, FL 32137

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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	MGRM
NAME	GUIGLOTTO, ANTHONY
STREET ADDRESS	30 COLLINGTON COURT
CITY-ST-ZIP	PALM COAST, FL 32137
TITLE	MGR
NAME	GUIGLOTTO, MARYANNE
STREET ADDRESS	30 COLLINGTON COURT
CITY-ST-ZIP	PALM COAST, FL 32137
TITLE	MGR
NAME	HOTTINGER, RICHARD & ROSE
STREET ADDRESS	25 SAN MARCO COURT
CITY-ST-ZIP	PALM COAST, FL 32137
TITLE	MGR
NAME	PAGE, RONALD/ ANGELA
STREET ADDRESS	20 CEDAR HOLLOW COURT
CITY-ST-ZIP	PALM COAST, FL 32137
TITLE	MGR
NAME	PUCKHABER, WILLIAM & RONI
STREET ADDRESS	63 RAEMONT ROAD
CITY-ST-ZIP	GRANITE SPRINGS, NY 10527
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000500465
04/25/06-80023-008 50.00

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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: _____ 4/5/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #