


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L03000037239

1. Entity Name
COASTLINE COMMONS, L.L.C.



Principal Place of Business 555 NO. CONGRESS AVE., SUITE 301 BOYNTON BEACH, FL 33426	Mailing Address 555 NO. CONGRESS AVE., SUITE 301 BOYNTON BEACH, FL 33426
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DO NOT WRITE IN THIS SPACE

FILED

07 MAY -9 AM 10:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01052007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 05-0597978	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KALEEL, KENNETH M
555 NO. CONGRESS AVE., SUITE 301
BOYNTON BEACH, FL 33426

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KALEEL, KENNETH M 555 NO. CONGRESS AVE., SUITE 301 BOYNTON BEACH, FL 33426
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**DO NOT WRITE
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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 trustee or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _____ **Date:** 4/25/07 **Daytime Phone #:** 561-738-1104

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE