2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000016577

Address:

City-St-Zip:

1219 WYNFORD COLONY

MARIETTA, GA 30064

Entity Name: EASTERN COVE 42, LLC

FILED Jan 17, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 174 WATERCOLOR WAY SUITE 306 SANTA ROSA BEACH, FL 32459 **New Mailing Address: Current Mailing Address:** 174 WATERCOLOR WAY SUITE 306 SANTA ROSA BEACH, FL 32459 FEI Number: 20-2384723 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BURKE, M. TODD ESQ 215 GRAND BOULEVARD STE. 101 DESTIN, FL 32550 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: ADDITIONS/CHANGES: MGRM Title: () Delete (X) Change () Addition WRIGHT, E. ALLEN WRIGHT, E. ALLEN Name: Name: 6955 BRIXTON PLACE Address: 180 EAST SHALLOWS DRIVE Address: City-St-Zip: SUWANEE, GA 30024 City-St-Zip: SANTA ROSA BEACH, FL 32459 Title: MGRM () Delete Title: () Change () Addition Name: WRIGHT, WILLIAM A Name: Address: 680 KNAPPS HIGHWAY Address: City-St-Zip: FAIRFIELD, CT 06825 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition RUDEN, CLIFFORD A Name: Name: Address: 174 WATERCOLOR WAY #306 Address: City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: RUDEN, GEORGE B Name:

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.

Address:

City-St-Zip:

SIGNATURE: CLIFFORD RUDEN MM 01/17/2008