

**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Feb 28, 2007  
Secretary of State**

DOCUMENT# L05000032128

Entity Name: EAST COAST FLATS, LLC

**Current Principal Place of Business:**

2699 LEE RD.  
SUITE 511  
WINTER PARK, FL 32789

**New Principal Place of Business:**

**Current Mailing Address:**

2699 LEE RD.  
SUITE 511  
WINTER PARK, FL 32789

**New Mailing Address:**

FEI Number: 27-0127944      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

MCNAMARA, THOMAS P  
2909 BAY TO BAY BLVD., SUITE 309  
TAMPA, FL 33629 US

**Name and Address of New Registered Agent:**

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:**

Title: MGR ( ) Delete  
Name: SHAVER, JAMES A  
Address: 16624 COBBLESTONE LANE  
City-St-Zip: CLERMONT, FL 34711

Title: MGR ( ) Delete  
Name: IRWIN, BENN S  
Address: 679 MONTREAL LANE  
City-St-Zip: SANFORD, FL 32771

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: JAMES. A. SHAVER

MGR

02/28/2007

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date