2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# L07000104312

Entity Name: CORAL SANDS CONSTRUCTION, LLC

Current Principal Place of Business:

127 HARRISBURG STREET
PORT CHARLOTTE, FL 33954

New Principal Place of Business:

1075 INNOVATION DRIVE
SUITE 110
NORTH PORT, FL 34289

Current Mailing Address:

18530 MACK AVE., SUITE 367
GROSSE POINTE FARMS, MI 48236

New Mailing Address:

FEI Number: 90-0338169 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRIGGS, DAVID
127 HARRISBURG STREET
PORT CHARLOTTE, FL 33954 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: GRIGGS, DAVID T
Address: 127 HARRISBURG STREET
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: MGR ( ) Delete
Name: APKARIAN, SCOTT A
Address: 127 HARRISBURG STREET
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: MGR ( ) Delete
Name: BUDZIAK, JAMES E
Address: 127 HARRISBURG STREET
City-St-Zip: PORT CHARLOTTE, FL 33954

ADDITIONS/CHANGES:

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

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 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 BUDZIAK MGR. 04/30/2009

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