

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000089936

Entity Name: CMP COASTAL PARTNERS, LLC

Current Principal Place of Business:

250 W. SEAVIEW CIRCLE
DUCK KEY, FL 33050

Current Mailing Address:

3935 LAKEFIELD COURT
SUWANEE, GA 30024

FEI Number: 26-3409482

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JOLLY, H.P.
250 W. SEAVIEW CIRCLE
DUCK KEY, FL 33050 US

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

Authorized Person(s) Detail :

| | | | |
|-----------------|---------------------------|-----------------|----------------------|
| Title | MGRM | Title | MGRM |
| Name | JOLLY, H. P. | Name | JOLLY, WARREN S |
| Address | 250 W. SEAVIEW CIRCLE | Address | 3935 LAKEFIELD COURT |
| City-State-Zip: | DUCK KEY FL 33050 | City-State-Zip: | SUWANEE GA 30024 |
| | | | |
| Title | AUTHORIZED MEMBER | | |
| Name | MASCHMEYER, WILLIAM M | | |
| Address | 13689 BROMLEY POINT DRIVE | | |
| City-State-Zip: | JACKSONVILLE FL 32225 | | |

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WILLIAM M MASCHMEYER

AUTHORIZED MEMBER

01/11/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date