

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000045378

**Entity Name:** 4436 COASTAL HIGHWAY, LLC

**Current Principal Place of Business:**

1352 W. BEAVER STREET  
JACKSONVILLE, FL 32209

**Current Mailing Address:**

P.O. BOX 2348  
JACKSONVILLE, FL 32203

**FEI Number:** 27-2452425

**Certificate of Status Desired:** No

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

WAINRIGHT, TAMMY L  
1352 W. BEAVER STREET  
JACKSONVILLE, FL 32209 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	POPE, JAMES R	Name	WAINRIGHT, TAMMY L
Address	7580 SAN JOSE BLVD	Address	7580 SAN JOSE BLVD
City-State-Zip:	JACKSONVILLE FL 32217	City-State-Zip:	JACKSONVILLE FL 32217

*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:** TAMMY WAINRIGHT

MGRM

01/13/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date