

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000179289

**Entity Name:** COASTAL TREE LLC

**Current Principal Place of Business:**

130 CORRIDOR ROAD  
#1847  
PONTE VEDRA BEACH, FL 32004

**Current Mailing Address:**

P O BOX 1847  
PONTE VEDRA BEACH, FL 32004 US

**FEI Number:** 47-2356775

**Certificate of Status Desired:** No

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

MADDEN, BRANDON J  
130 CORRIDOR ROAD  
#1847  
PONTE VEDRA BEACH, FL 32004 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:** BRANDON J MADDEN

01/28/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MANAGER	Title	AUTHORIZED MEMBER
Name	MADDEN, BRANDON J	Name	GALLIGAN, KAREN
Address	440 AVILLA AVENUE	Address	P O BOX 1847
City-State-Zip:	ST. AUGUSTINE FL 32084	City-State-Zip:	PONTE VEDRA BEACH FL 32004

*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:** BRANDON J MADDEN

MANAGER

01/28/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date