2006 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Feb 16, 2006 8:00 am **Secretary of State** DOCUMENT # K99074 1. Entity Name 02-16-2006 90059 024 ***158.75 LA COQUILLE CLUB, INC. Mailing Address Principal Place of Business 100 SOUTH OCEAN BLVD. MANALAPAN FL 33462 100 SOUTH OCEAN BLVD. MANALAPAN FL 33462 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) Applied For City & State City & State 4. FEI Number 58-1893133 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HUTCHEON, ROBERT D Street Address (P.O. Box Number is Not Acceptable) 302 CYPRESS TRACE WEST PALM BEACH FL 33411 Zip Code City 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 (1) 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. Delete TITLE Change Change Addition ALEXANDER ARNOLD HANEY, EMELINE NAME STREET ADDRESS 3340 SOUTH OCEAN BLUD. STREET ADDRESS 400 S. OCEAN BLVD CITY-ST-ZIP MANALAPAN FL 33462 CITY-ST-7IP PALM BEDEN, FL 33460 Addition ☐ Change Delete TITLE TITLE MAY, B.J. WILLIAM QUIGLEY NAME NAME STREET ADDRESS 7621 MACKENZIE COURT STREET ADDRESS 1841TTLE DONG RUDO CITY-ST-ZIP CITY-ST-ZIP LAKE WORTH FL 33483 MONOLAPON TIL 33462 ■ Addition ☐ Detete MAME ALEXANDER. ARNOLD_ POUVE-CEOLECT STREET ADDRESS STREET ADDRESS 3360 SOUTH OCEAN BLVD. I LOCGERHEAD LONG CITY-ST-ZIP CITY-ST-ZIP PALM BEACH FL 33480 MANDARAN FL 33462 Change Addition Addition Delete TITLE TITLE 50 PAYNE, GEORGE NAME NAME PERZUTO DEGGY STREET ADDRESS 961 SO. ATLANTIC DRIVE STREET ADDRESS 410 No. ATLANTIC DA CITY-ST-ZIP LANTANA FL 33462 CITY-ST-ZIP HYPOLUXO, FL 33462 Change : ☐ Addition TITLE ☐ Delete TITLE HYLAND, GINA NAME NAME HANEY EMELINE 25 CURLEW ROAD STREET ADDRESS STREET ADDRESS 401 SO OCEAN BLVD. MANALAPAN FL 33402 CITY-ST-ZIP CITY-ST-7/P MOUDIAPON FL 33402 ☐ Change Addition TITLE ☐ Delete TITLE BARDELIS, GRACE BASSELIS GROCE NAME NAME

hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under early that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

FICER OR DIRECTOR

1171 N OCEAN BLVD.

DELRAY BEACH FL 33483

STREET ADDRESS

CITY-ST-ZIP

1/27/04 561- 540. 4909

2764 SO OCEAN BENO # 5025

N BEACH FL 33450

FILED