2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000004347

Entity Name: COACHMAN MEADOWS, LLC

FILED Feb 18, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4729 U.S. HIGHWAY 17 414 OLD HARD ROAD

SUITE 204 SUITE 201

ORANGE PARK, FL 32003 ORANGE PARK, FL 320033408 US

Current Mailing Address: New Mailing Address:

4729 U.S. HIGHWAY 17 414 OLD HARD ROAD

SUITE 204 SUITE 201

ORANGE PARK, FL 32003 ORANGE PARK, FL 320033408 US

FEI Number: 59-3712961 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WOOD, JAMES R 4729 U.S. HIGHWAY 17 414 OLD HARD ROAD

SUITE 204 SUITE 201
ORANGE PARK, FL 32003 US ORANGE PARK, FL 320033408 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: 02/18/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 WOOD, JAMES RICKY PRES.
 Name:
 WOOD, JAMES RICKY

 Address:
 4729 US HIGHWAY 17, SUITE 204
 Address:
 414 OLD HARD ROAD, SUITE 201

 City-St-Zip:
 ORANGE PARK, FL 32003
 City-St-Zip:
 ORANGE PARK, FL 320033408 US

Title: MGR () Delete Title: MGR (X) Change () Addition

Name: WOOD, SUSAN D V.P. Name: WOOD, SUSAN D
Address: 4729 US HIGHWAY 17. SUITE 204 Address: 414 OLD HARD ROAD. SUITE 201

City-St-Zip: ORANGE PARK, FL 32003 City-St-Zip: ORANGE PARK, FL 320033408 US

Title: MGR () Delete Title: MGR (X) Change () Addition Name: EDWARDS, JR., MABRY - C.F.O. Name: EDWARDS, MABRY - JR.

Address: 4729 US HIGHWAY 17, SUITE 204 Address: 414 OLD HARD ROAD, SUITE 201
City-St-Zip: ORANGE PARK, FL 32003 City-St-Zip: ORANGE PARK, FL 320033408 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BY: SUSAN D WOOD MGR 02/18/2005