


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Aug 31, 2007 08:00 A
Secretary of State

DOCUMENT # L01000017999 1. Entity Name COAST BRANDON TOWN CENTER, P.L.	
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Principal Place of Business 2118 WEST BRANDON BLVD., SUITE K BRANDON, FL 33511	Mailing Address 2502 N ROCKY POINT DRIVE 1000 TAMPA, FL 33607 US
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07162007 No Chg-LLC

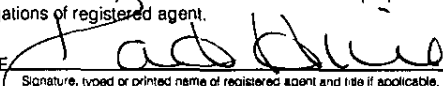
CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3737319	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent HUIE, PATRICIA A ESQ 2502 N ROCKY POINT DRIVE, SUITE 1000 TAMPA, FL 33607

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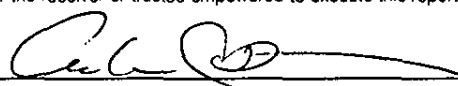
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE  <small>Signature, typed or printed name of registered agent and title if applicable.</small>	DATE 7.23.07 <small>(NOTE: Registered Agent signature required when reinstating)</small>

**Filing Fee is \$50.00
Due by September 14, 2007**

U000000773130
08/31/07-80002-002 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM COAST FLORIDA, P.A. 2502 ROCKY POINT DRIVE, SUITE 1000 TAMPA, FL 33607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JP AUSTIN, INC. 2502 ROCKY POINT DRIVE, 1000 TAMPA, FL 33607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	DATE 7/12/07 <small>Daytime Phone #</small>