

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000021811

FILED  
Sep 10, 2008  
Secretary of State

**Entity Name:** BIJOU COASTAL DEVELOPMENT LLC

**Current Principal Place of Business:**

45 INDIGO LOOP  
DESTIN, FL 32550 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 4783  
FORT WALTON BEACH, FL 32549 US

**New Mailing Address:**

FEI Number: 22-3849647      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

GIBSON, MICHAEL O  
337 CALHOUN AVE  
DESTIN, FL 32541 US

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

GIBSON, MICHAEL O  
45 INDIGO LOOP CIRCLE SOUTH  
MIRAMAR BEACH, FL 32550 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: \_\_\_\_\_

09/10/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GIBSON, MICHAEL O  
Address: PO BOX 4783  
City-St-Zip: FT. WALTON BEACH, FL 32549

Title: MGRM ( ) Delete  
Name: STEINER, MICHELE W  
Address: 337 CALHOUN AVE  
City-St-Zip: DESTIN, FL 32541

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MICHAEL O. GIBSON

MGRM

09/10/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date