2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

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DOCUMENT # L02000002030

COTÉ D'EMERAUDE PROPERTIES, L.L.C.



Principal Place of Business

Mailing Address

5200 WEST COUNTY HIGHWAY 30-A SANTA ROSA BEACH, FL 32459

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FILED Apr 14, 2008 8:00 am Secretary of State

04-14-2008 90227 047 ***138.75

60022603

02012008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 80-0029260 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

PLEAT, DAVID B ESQ. 4477 LEGENDARY DRIVE DESTIN, FL 32541

SIGNATURE:

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the abligations of registered agent.				
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered	Agent signature required when reinstating)	DATE
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75				
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BRASSEUR, MICHEL 89 HOTZ-AVE 5200 W Huy C-304 SANTA ROSA BEACH, FL 32459			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BRASSEUR, REBECCA 99 HOTZAVE 5200 W HW4 C-30-M SANTA ROSA BEACH, FL 32459			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT	WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS S	SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS				

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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE