

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L02000025065

FILED
Apr 18, 2003
Secretary of State

Entity Name: COASTAL OAKS MOBILE HOME PARK, LLC

Current Principal Place of Business:

4552 SABINE DRIVE
GULF BREEZE, FL 32563

New Principal Place of Business:

Current Mailing Address:

4552 SABINE DRIVE
GULF BREEZE, FL 32563

New Mailing Address:

FEI Number: 43-1975912

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLEVENGER, BRENDA F
4552 SABINE DRIVE
GULF BREEZE, FL 32563

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: CLEVENGER, BRENDA F MGRM
Address: 4552 SABINE DRIVE
City-St-Zip: GULF BREEZE, FL 32563 US

Title: MGRM () Change (X) Addition
Name: CLEVENGER, DAVID L MGRM
Address: 4552 SABINE DRIVE
City-St-Zip: GULF BREEZE, FL 32563 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: BRENDA F. CLEVENGER

MGRM

04/18/2003

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