


**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jul 15, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L02000034711</b> 1. Entity Name BONITA COASTAL PROPERTIES, LLC	
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Principal Place of Business 9690 RAVEN COURT ESTERO, FL 33928	Mailing Address PO BOX 367281 BONITA SPRINGS, FL 34136-7281
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07122005No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 75-3095951	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent  IGOE, JEANETTE I 9690 RAVEN COURT ESTERO, FL 33928
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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>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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<b>Filing Fee is \$50.00 Due by September 7, 2005</b>	U00000372930 07/15/05-80003-011 50.00
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR IGOE, JEANETTE 9690 RAVEN CT. ESTERO, FL 33928
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SKINNER, OANIEZ PO BOX 2388 HUNTSVILLE, AL 35804
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

<b>SIGNATURE:</b> 	7-13-05
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<small>Date Daytime Phone #</small>