2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE: MULLIUM B. MAN J. D. MAN DE HER OF AUTHORIZED HEPPESENTATIVE

FILED Apr 04, 2005 08:00 AM Secretary of State

Daytime Phone #

DOCUMENT # L03000010756" 1. Entity Name COASTAL DEVELOPERS, L.L.C.				Secretary of State		
	æ of Business RIAL PARK ROAD 32541 US	Mailing Address P. O. BOX 5018 DESTIN, FL 32540 US			DERFENDE DERFENDE DE SEN	
C	O NOT WRITE 6. Name and Address of Current Re	IN THIS SPA	CE	03282005 No Chg-LLC CR20 4. FEI Number 06-1687301 5. Certificate of Status Desired	E083 (10/03) Applied For Not Applicable \$5.00 Additional Fee Required	
DAVIS, C. WHITNEY 150 INDUSTRIAL PARK ROAD 5 DESTIN, FL 32541			DO NOT WRITE IN THIS SPACE			
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
Filing Fee is \$50.00 Due by May 1, 2005						
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS MGRM DAVIS DUNN CONSTRUCTION 150 INDUSTRIAL PARK ROAD, ST DESTIN, FL 32541					
TITLE Name Street address City-St-Zip	ESS			######################################		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRIT	E	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP						
11. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited Itability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.						