

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000015877

**FILED**  
**Feb 10, 2006**  
**Secretary of State**

**Entity Name:** COASTAL PROPERTIES ASSOCIATION MANAGEMENT, LLC

**Current Principal Place of Business:**

37 LOGAN LANE, STE. 4  
GRAYTON BEACH, FL 32459

**New Principal Place of Business:**

36132 EMERALD COAST PARKWAY  
SUITE 3  
DESTIN, FL 32541

**Current Mailing Address:**

37 LOGAN LANE, STE. 4  
GRAYTON BEACH, FL 32459

**New Mailing Address:**

36132 EMERALD COAST PARKWAY  
SUITE 3  
DESTIN, FL 32541

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

HART, W C  
34990 EMERALD COAST PKWY., SUITE 301  
DESTIN, FL 32541 US

**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/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WARD, SUSAN  
Address: 37 LOGAN LANE, STE. 4  
City-St-Zip: GRAYTON BEACH, FL 32459

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: WARD, SUSANNE J  
Address: 36132 EMERALD COAST PKWY, SUITE 3  
City-St-Zip: DESTIN, FL 32541

I hereby certify that the information supplied with this filing does not qualify for the 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: SUSANNE J. WARD

MGRM

02/10/2006

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