

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000017854

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

**Entity Name:** EMERALD COAST HOSPITALITY, LLC

**Current Principal Place of Business:**

3220 COUNTRY CLUB DRIVE  
LYNN HAVEN, FL 32444

**New Principal Place of Business:**

1815 HWY 77  
LYNN HAVEN, FL 32444

**Current Mailing Address:**

3220 COUNTRY CLUB DRIVE  
LYNN HAVEN, FL 32444

**New Mailing Address:**

**FEI Number:** 75-3119603      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

NANJI, KIRAN  
3220 COUNTRY CLUB DRIVE  
LYNN HAVEN, FL 32444      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  
**Name:** PATEL, KETAN  
**Address:** 3206 COUNTRY CLUB DRIVE  
**City-St-Zip:** LYNN HAVEN, FL 32444

**Title:** MGRM  
**Name:** NANJI, KIRAN  
**Address:** 3220 COUNTRY CLUB DRIVE  
**City-St-Zip:** LYNN HAVEN, FL 32444

I hereby 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: KIRAN NANJI      MGRM      04/27/2010

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