
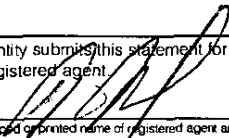
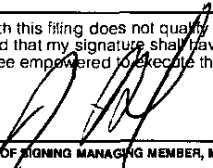


# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 19, 2004 8:00 am**  
**Secretary of State**

04-19-2004 90042 029 \*\*\*\*50.00

<b>DOCUMENT # L03000020412</b> 1. Entity Name <b>COCONUTS BY THE SEA, LLC</b>					
Principal Place of Business <b>1825 NAVARRE SOUND CIRCLE NAVARRE, FL 32566</b>			Mailing Address <b>1825 NAVARRE SOUND CIRCLE NAVARRE, FL 32566</b>		
2. Principal Place of Business <b>400 Pensacola Beach Blvd</b> Suite, Apt. #, etc.		3. Mailing Address <b>400 Pensacola Beach Blvd</b> Suite, Apt. #, etc.			
City & State <b>Pensacola Beach, FL</b>		City & State <b>Pensacola Beach, FL</b>		4. FEI Number <b>54-2122896</b>	
Zip <b>32566</b>		Country <b>Escambia</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>MOORHEAD, STEPHEN R 4300 BAYOU BLVD., STE. 13 PENSACOLA, FL 32503</b>			7. Name and Address of New Registered Agent Name <b>Jorge Nabel</b> Street Address (P.O. Box Number is Not Acceptable) <b>400 Pensacola Beach Blvd</b> City <b>Pensacola Beach</b> <b>FL</b> Zip Code <b>32561</b>		
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  DATE <b>4/15/04</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$50.00 Due by May 1, 2004</b>			<b>Make check payable to Florida Department of State</b>		
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WOODIE, JAMES 1825 NAVARRE SOUND CIRCLE NAVARRE, FL 32566	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WOODIE, DEANNA 1825 NAVARRE SOUND CIRCLE NAVARRE, FL 32566	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Jorge Nabel 400 Pensacola Beach Blvd Pensacola Beach, FL 32561	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
<b>SIGNATURE:</b> 			Date <b>4/15/04</b> Daytime Phone #		