


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 24, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000031705 1. Entity Name FORGOTTEN COAST INVESTMENTS LLC	
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Principal Place of Business 351 BRUCE ST ST GEORGE ISLAND, FL 32328 US	Mailing Address 351 BRUCE ST ST GEORGE ISLAND, FL 32328 US
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DO NOT WRITE IN THIS SPACE



07132007No Chg-LLC

CR2E083 (11/05)

4. FEI Number 56-2392689	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**KISLING, WILLIAM
351 BRUCE ST
ST GEORGE ISLAND, FL 32328**

**DO NOT WRITE
IN THIS SPACE**

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 _____
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 September 14, 2007**

U000000770118
07/24/07-80003-006 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KISLING, WILLIAM 351 BRUCE ST EASTPOINT, FL 32328
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MEADOWS, JIM 2203 TAYLOR DRIVE DALTON, GA 30720
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KING, CHRIS 401 CECIL G. POSTIN SR BLVD PORT SAINT JOE, FL 32456
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ROBERTS, SCOTT 351 BRUCE ST EASTPOINT, FL 32328
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE 	7/16/07	8509274423
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<small>Date</small>	<small>Daytime Phone #</small>