

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000035725

**FILED**  
**Apr 13, 2008**  
**Secretary of State**

**Entity Name:** COASTAL TOWING & MARINE SERVICES, LLC

**Current Principal Place of Business:**

1344 PINE NEEDLE RD  
VENICE, FL 34285

**New Principal Place of Business:**

**Current Mailing Address:**

1435 EAST VENICE AVE  
#117  
VENICE, FL 34292

**New Mailing Address:**

1344 PINE NEEDLE RD  
VENICE, FL 34285

**FEI Number:** 20-0239770

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DEGENARO, NICHOLAS P  
1344 PINE NEEDLE RD  
VENICE, FL 34285 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: MGR ( ) Delete  
Name: DEGENARO, NICHOLAS P  
Address: 1435 EAST VENICE AVE  
City-St-Zip: VENICE, FL 34285

Title: MGR ( ) Delete  
Name: DEGENARO, LISA J  
Address: 1344 PINE NEEDLE RD  
City-St-Zip: VENICE, FL 34285

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: DEGENARO, NICHOLAS P  
Address: 1344 PINE NEEDL ROAD  
City-St-Zip: VENICE, FL 34285

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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:** NICHOLAS P DEGENARO

MGR

04/13/2008

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