

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 24, 2006 8:00 am**  
**Secretary of State**

04-24-2006 90064 004 \*\*\*\*50.00

**DOCUMENT # L03000036004**

1. Entity Name  
COASTAL CRAFTSMEN BUILDERS, LLC



Principal Place of Business  
924 GAINESVILLE HIGHWAY  
SUITE 120  
BUFORD, GA 30518

Mailing Address  
924 GAINESVILLE HIGHWAY  
SUITE 120  
BUFORD, GA 30518

40059179



02162006 No Chg-LLC CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
76-0739102

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

MACK, WENDY L  
5800 LAKEWOOD RANCH BOULEVARD  
SARASOTA, FL 34240

CT Corporation System  
1200 S. Pine Island Rd.  
Plantation, FL 33324

**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

JOAN BOLDEN

(NOTE: Registered Agent must be a resident of the State of Florida.)  
ASSISTANT SECRETARY

DATE

**Filing Fee is \$50.00  
Due by May 1, 2006**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGRM  
DOOLEY, TERRY W  
924 GAINESVILLE HIGHWAY SUITE 120  
BUFORD, GA 30518

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
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STREET ADDRESS  
CITY - ST - ZIP

**DO NOT WRITE  
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:   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date Daytime Phone #