## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## May 02, 2005 08:00 AM Secretary of State DOCUMENT # L03000042159 CORONADO CONDOMINIUM, LLC Principal Place of Business Mailing Address 41 W. INTERSTATE 65 SERVICE ROAD N. P.O. BOX 160306 MOBILE, AL 36609-1201 MOBILE, AL 36616-1306 04212005 No Cha-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0905501 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HIGHTOWER, DAVID E DO NOT WRITE 501 COMMENDENCIA STREET PENSACOLA, FL 32502 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) Filing Fee is \$50.00 Due by May 1, 2005 g. MANAGING MEMBERS/MANAGERS MGRM TITLE NAME THE MITCHELL COMPANY, INC. STREET ADDRESS 41 W. INTERSTATE 65 SERVICE ROAD N. C!TY-ST-ZIP MOBILE, AL 366081201 U00000356350 TITLE 05/04/05-80032-005 50.00 NAME STREET ADDRESS CITY-SY-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE

11. I hereby certify that the information supplied with this filling 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.

SIGNATURE TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED DEPORESENTATIVE

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

1-21-09

**FILED**