

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000047551

FILED  
Apr 20, 2004  
Secretary of State

Entity Name: EMERALD COAST LTD. CO.

## Current Principal Place of Business:

2808 OAK RIDGE DRIVE  
GULF BREEZE, FL 32563

## New Principal Place of Business:

5625 DIXIE DRIVE #12  
PENSACOLA, FL 32503 US

## Current Mailing Address:

2808 OAK RIDGE DRIVE  
GULF BREEZE, FL 32563

## New Mailing Address:

PO BOX 415  
GULF BREEZE, FL 325620415 US

FEI Number: 20-0451166

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PRIDGEN, ANDRIA L  
2808 OAK RIDGE DRIVE  
GULF BREEZE, FL 32563 US

## Name and Address of New Registered Agent:

PRIDGEN, ANDRIA L  
1169 SANIBEL LANE  
GULF BREEZE, FL 32563 US

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: ANDRIA L PRIDGEN

04/20/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: PRIDGEN, ANDRIA L  
Address: 2808 OAK RIDGE DRIVE  
City-St-Zip: GULF BREEZE, FL 32563

Title: MGR ( ) Delete  
Name: RIOS, JENNIFER L  
Address: 8339 SPHERE WAY  
City-St-Zip: PENSACOLA, FL 32514

Title: MGR ( ) Delete  
Name: BASARICH, DAVID  
Address: 6460 STARFISH COVE  
City-St-Zip: GULF BREEZE, FL 32563

Title: MGR ( ) Delete  
Name: BASARICH, CECELIA S  
Address: 6460 STARFISH COVE  
City-St-Zip: GULF BREEZE, FL 32563

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: PRIDGEN, ANDRIA L  
Address: 1169 SANIBEL LANE  
City-St-Zip: GULF BREEZE, FL 32563

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ANDRIA L PRIDGEN

MGR

04/20/2004

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