## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000047551

Entity Name: EMERALD COAST LTD. CO.

FILED Apr 20, 2005 Secretary of State

US

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

5625 DIXIE DRIVE #12 PENSACOLA, FL 32503 US

Current Mailing Address: New Mailing Address:

PO BOX 415 5625 DIXIE DRIVE #12

GULF BREEZE, FL 325620415 US PENSACOLA, FL 32503 US

FEI Number: 20-0451166 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

PRIDGEN, ANDRIA L
1169 SANIBEL LANE
GULF BREEZE, FL 32563 US
PRIDGEN, ANDRIA L
5625 DIXIE DRIVE #12
PENSACOLA, FL 32503

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 04/20/2005

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 PRIDGEN, ANDRIA L
 Name:

 Address:
 1169 SANIBEL LANE
 Address:

 City-St-Zip:
 GULF BREEZE, FL 32563
 City-St-Zip:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 RIOS, JENNIFER L
 Name:

 Address:
 8339 SPHERE WAY
 Address:

 City-St-Zip:
 PENSACOLA, FL 32514
 City-St-Zip:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BASARICH, DAVID
 Name:

 Address:
 6460 STARFISH COVE
 Address:

 City-St-Zip:
 GULF BREEZE, FL 32563
 City-St-Zip:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BASARICH, CECELIA S
 Name:

 Address:
 6460 STARFISH COVE
 Address:

 City-St-Zip:
 GULF BREEZE, FL 32563
 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 04/20/2005