

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000047707

FILED  
Feb 13, 2004  
Secretary of State

Entity Name: COASTAL CREATIONS, LLC

## Current Principal Place of Business:

2150 W. DALE CIR.  
DELAND, FL 32720 US

## New Principal Place of Business:

## Current Mailing Address:

2150 W. DALE CIR.  
DELAND, FL 32720 US

## New Mailing Address:

PO BOX 1446  
DELAND, FL 327211446 US

FEI Number: 20-0437952

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EDWARDS, WILLIAM  
2150 W. DALE CIR.  
DELAND, FL 32720 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/MEMBERS:

Title: P ( ) Delete  
Name: EDWARDS, WILLIAM R  
Address: PO BOX 156  
City-St-Zip: ASTOR, FL 32102 US

Title: VP ( ) Delete  
Name: REED, STEPHANIE  
Address: PO BOX 156  
City-St-Zip: ASTOR, FL 32102 US

Title: S ( ) Delete  
Name: REED, GARY B  
Address: PO BOX 1446  
City-St-Zip: DELAND, FL 32721 US

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: EDWARDS, WILLIAM R  
Address: PO BOX 156  
City-St-Zip: ASTOR, FL 32102 US

Title: MGR (X) Change ( ) Addition  
Name: REED, STEPHANIE  
Address: PO BOX 156  
City-St-Zip: ASTOR, FL 32102 US

Title: MGR (X) Change ( ) Addition  
Name: REED, GARY B  
Address: PO BOX 1446  
City-St-Zip: DELAND, FL 32721 US

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: STEPHANIE REED

MGR

02/13/2004

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