# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Apr 30, 2007 08:00 AM**
**Secretary of State**

DOCUMENT # L03000050011

1. Entity Name
EASTCOAST BUILDERS, LLC

| Principal Place of Business | Mailing Address |
|---|---|
| 203 N. RIVERSIDE DRIVE<br>EDGEWATER, FL 32132 US | 203 N. RIVERSIDE DRIVE<br>EDGEWATER, FL 32132 US |

04032007No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

ARMITAGE, CHARLES A
203 N. RIVERSIDE DRIVE
EDGEWATER, FL 32132

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is $600.00**
**Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

| | |
|---|---|
| TITLE | MGR |
| NAME | ARMITAGE, CHARLES A |
| STREET ADDRESS | 203 N. RIVERSIDE DRIVE |
| CITY-ST-ZIP | EDGEWATER, FL 32132 |
| TITLE | |
| NAME | |
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| CITY-ST-ZIP | |

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05/16/07-80041-022 50.00

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10. 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 605, Florida Statutes.

**SIGNATURE:** Charles Armitage 4/26/07
Signature and typed or printed name of individual authorized to execute this report — Date — Daytime Phone #