

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Apr 27, 2005 8:00 am
Secretary of State

04-27-2005 90267 001 ****50.00
04-27-2005 90267 002 ****12.42

DOCUMENT # L04000017046

1. Entity Name

COASTAL PROPERTY, LLC



Principal Place of Business

6363 NW 6TH WAY
470
FORT LAUDERDALE FL 33309

Mailing Address

6363 NW 6TH WAY
470
FORT LAUDERDALE FL 33309

2. Principal Place of Business

8452 S. US Highway 1

3. Mailing Address

P.O. Box 7696

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Port St. Lucie, FL

City & State

Port St. Lucie, FL

Zip

34952

Country

Indian River

Zip

34952

Country

Indian River

4. FEI Number

20-090446

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ROWLEY, S. PIKE
6363 NW 6TH WAY
470
FORT LAUDERDALE FL 33309

7. Name and Address of New Registered Agent

Name Ward Snyder

Street Address (P.O. Box Number is Not Acceptable)

8452 S US Highway 1

City

Port St Lucie

FL

Zip Code

34952

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]

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/21/05

DATE

FILE NOW!!! FEE IS \$50.00

**Make Check Payable to Florida Department of State
Due By May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM ☐ Delete
NAME ROWLEY, S. PIKE
STREET ADDRESS 6363 NW 6TH WAY, STE. 470
CITY-ST-ZIP FORT LAUDERDALE FL 33309

TITLE MGRM ☐ Delete
NAME SNYDER, WARD JR.
STREET ADDRESS 6698 SO. U.S. HIGHWAY 1
CITY-ST-ZIP PORT ST. LUCIE FL 34952

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE MGRM ☒ Change ☐ Addition
NAME Rowley, S. Pike
STREET ADDRESS 1300 Sawgrass Corporate Highway, Suite 320
CITY-ST-ZIP Sunrise, FL 33323

TITLE MGRM ☒ Change ☐ Addition
NAME Snyder, Ward Jr
STREET ADDRESS 8452 S. US Highway 1
CITY-ST-ZIP Port St. Lucie, FL 34952

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing 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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4/21/05

Date

954-990-2101

Daytime Phone #