## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

09-14-2005 90072 005 \*\*\* 50.00

DOCUMENT # L04000019441					<b>45</b>			L040000	19441		
1. Entity Nam	ne			(S)		CAR S	CPATION	°C			
COASTAL SPORTS CAMPS, L.L.C.					5	PEC 30		Ĉ.			
Principal Place of Business Mailing Address							M11 10- 00				
1982 WEST	END PL		1982 WESTEND PL ORANGE PARK FL 320				2005816	<u>Ֆաստարա</u>	in sing sing his	est 14 1 <b>43</b> 1	
ORANGE PARK FL 32003 ORANGE PARK FL 32003											
Principal Place of Business			3. Mailing Address			M					
Suite, Apt. #, etc.			Suite, Apt. #, etc.			2	md MOORE	CR2E083	(5/05)		
City & State			City & State			4. FEI Numi	hber 14924	on on		plied For t Applicable	
Zip	Country		Zip	Country		5. Certificate of Status Desired					
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent						
PET	TER KELLY H	· IOYT		<u> </u>	Nane						
PETER KELLY HOYT 1982 WESTEND PL ORANGE PARK FL 32003				Street Addre			ress (P.Q. Box Number is Not Acceptable)				
ONANGE PAINTE 32003					City		<del></del>	Fi	Zip Code		
2 The shows			the section of choosing its		·	: or b	- 15 to the Clate of E	FL			
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 a explicable (NOTE Registered Agent signature required when reinstains)  OATE										
			FILE NO	OWIII FE	E IS \$50.00	· .					
Make Check Payable to Florida Department of State  Due By September 7, 2005											
9.		MANAGING MEMBE	10.			ADDITIONS	S/CHANGES				
TITLE	MGR	-							i□ Change?	Addition	
NAME STREET ADDRESS	PETER KELLY HOYT 1982 WESTEND PL				ADDRESS			DEC	급금		
CITY-ST-ZIP	ORANGE PARK FL 32003				- ZIP			ယ	<u> </u>		
TITLE	MGRM Delete				_	_			Change	Addition	
NAME STREET AUDRESS	PETER BOWEN HOYT 4 SILVER BLUFF WAY				ADDRESS	AH 10					
CITY-ST-ZIP					1-71P			Ö	÷, υ.		
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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 roport 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 ampowered to execute this report as required by Chapter 608, Florida Statutes.											
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