

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000032227

FILED
Mar 10, 2009
Secretary of State

Entity Name: SHINING SEAS OF PALM COAST, LLC

Current Principal Place of Business:

35 COTTONWOOD COURT
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

35 COTTONWOOD COURT
PALM COAST, FL 32137

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES FOSTER SERVICE, LLC
505 SOUTH FLAGLER DRIVE
SUITE 1100
WEST PALM BEACH, FL 33401 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/MANAGERS:

Title: MGRM () Delete
Name: COLEMAN, JAMES D
Address: 35 COTTONWOOD COURT
City-St-Zip: PALM COAST, FL 32137

Title: MGRM () Delete
Name: COLEMAN, RUTH ANNE
Address: 35 COTTONWOOD COURT
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: COLEMAN, JAMES D
Address: 35 COTTONWOOD COURT
City-St-Zip: PALM COAST, FL 32137 US

Title: MGRM (X) Change () Addition
Name: COLEMAN, RUTH ANNE
Address: 35 COTTONWOOD COURT
City-St-Zip: PALM COAST, FL 32137 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JAMES D. COLEMAN

MGRM

03/10/2009

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