



**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 17, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000037481			
1. Entity Name COASTAL DEVELOPMENT OF LEE COUNTY, L.L.C.			
Principal Place of Business 1318 LAFAYETTE ST CAPE CORAL, FL 33904		Mailing Address 1318 LAFAYETTE ST CAPE CORAL, FL 33904	
DO NOT WRITE IN THIS SPACE			
		 01062006 No Chg-LLC CR2E083 (11/05)	
		4. FEI Number 20-1134533	Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent HILL, THOMAS W 1318 LAFAYETTE ST CAPE CORAL, FL 33904		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>			
Filing Fee is \$50.00 Due by May 1, 2006			
9. MANAGING MEMBERS/MANAGERS		<div>U00000389064</div> <div>01/20/06-80028-021 50.00</div> DO NOT WRITE IN THIS SPACE	
TITLE	MGRM		
NAME	SNOW, ROBERT A		
STREET ADDRESS	1318 LAFAYETTE ST		
CITY - ST - ZIP	CAPE CORAL, FL 33904		
TITLE			
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
11. 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 606, Florida Statutes.			
SIGNATURE: <u>Robert A Snow</u>		Date <u>1-11-06</u>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date Daytime Phone #</small>	