

# **2005 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000046596

**FILED**  
**Oct 17, 2005**  
**Secretary of State**

**Entity Name:** HIGHLAND COASTAL PROPERTIES, LLC

**Current Principal Place of Business:**

116 LAKEWOOD DRIVE  
THOMASVILLE, GA 31792

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ORMAND E. HUNTER, JR.  
116 LAKEWOOD DRIVE  
THOMASVILLE, GA 31792

**New Mailing Address:**

**FEI Number:** 20-1261752

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GIBSON, TOM S  
206 EAST 4TH STREET  
PORT ST. JOE, FL 32456 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: THOMAS S. GIBSON

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: HUNTER, ORMAND E JR  
Address: 116 LAKEWOOD DRIVE  
City-St-Zip: THOMASVILLE, GA 31792

Title: MGR ( ) Delete  
Name: MCINTOSH, GEORGE C  
Address: 116 LAKEWOOD DRIVE  
City-St-Zip: THOMASVILLE, GA 31792

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ORMAND E. HUNTER JR.

MGR

10/17/2005

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