

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000048260

Entity Name: 360 COASTAL DESIGN, LLC

FILED  
May 04, 2006  
Secretary of State

**Current Principal Place of Business:**

99 SHELL ISLAND ROAD  
ST MARKS, FL 323550611

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 611  
ST MARKS, FL 323550611

**New Mailing Address:**

FEI Number: 06-1728546      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

FLETCHER, D. MARK CPA  
LANIGAN & ASSOCIATES, P.C.  
1292 TIMBERLANE ROAD  
TALLAHASSEE, FL 32312 US

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: MR ( ) Delete  
Name: DUVERGER, ROY R  
Address: PO BOX 611  
City-St-Zip: ST MARKS, FL 323550611 US

Title: MS ( ) Delete  
Name: MARYBETH, HAYES  
Address: PO BOX 611  
City-St-Zip: ST MARKS, FL 323550611 US

**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 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: ROY R DUVERGER

MGRM

05/04/2006

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