

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000054731

Entity Name: COASTINGS, LLC

FILED
Mar 09, 2005
Secretary of State

Current Principal Place of Business:

120 LEONARD'S DRIVE
THOMASVILLE, GA 31792

New Principal Place of Business:

Current Mailing Address:

120 LEONARD'S DRIVE
THOMASVILLE, GA 31792

New Mailing Address:

FEI Number: 20-2305329

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWMAN, DEBORAH
338 CAPE SAN BLAS ROAD
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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: EMMETT, ROBERT
Address: 120 LEONARD'S DRIVE
City-St-Zip: THOMASVILLE, GA 31792

Title: MGRM () Delete
Name: HUBER, TONY
Address: PO BOX 1916
City-St-Zip: THOMASVILLE, GA 31799

Title: MGRM () Delete
Name: HARRISON, DEXTER
Address: 450 20TH STREET SE
City-St-Zip: CAIRO, GA 39828

ADDITIONS/CHANGES:

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

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: ROBERT EMMETT

MR.

03/09/2005

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