

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000070877

**FILED**  
**Sep 27, 2007**  
**Secretary of State**

**Entity Name:** COASTAL ARCHITECTURAL PRODUCTS LLC

**Current Principal Place of Business:**

2808 SAM SNEAD COURT  
SHALIMAR, FL 32579

**New Principal Place of Business:**

534 PARRISH BLVD  
SHALIMAR, FL 32569

**Current Mailing Address:**

2808 SAM SNEAD COURT  
SHALIMAR, FL 32579

**New Mailing Address:**

534 PARRISH BLVD  
MARY ESTHER, FL 32569

**FEI Number:** 20-1678837

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COLLIER, WILLIAM  
2808 SAM SNEAD COURT  
SHALIMAR, FL 32579 US

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

COLLIER, WILLIAM  
534 PARRISH BLVD  
MARY ESTHER, FL 32569 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: WILLIAM L. COLLIER

09/27/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: COLLIER, WILLIAM  
Address: 2808 SAM SNEAD COURT  
City-St-Zip: SHALIMAR, FL 32579

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: COLLIER, WILLIAM  
Address: 534 PARRISH BLVD  
City-St-Zip: MARY ESTHER, FL 32569

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: WILLIAM L COLLIER

MGRM

09/27/2007

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