2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000010889

Address:

10642 QUEEN AVE

City-St-Zip: LA MESA, CA 91941

Entity Name: COAST WEST LAND DEVELOPMENT, LLC

FILED Apr 25, 2008 Secretary of State

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	ND AVENUE EAST ON SHORES, FL 33708			
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
P.O. BOX SEMINOLI	3272 E, FL 337753272			
FEI Number	: 20-2568195 FEI Number Applied For () FEI Number Not Applicable()	Certificate of Status Desired ()	
Name and	I Address of Current Registered Agen	t: Name and Address o	of New Registered Agent:	
635 - 182N REDINGT	E, DAVID C ND AVENUE EAST ON SHORES, FL 33708 US	the purpose of abonging its registers	d office or registered agent or both	
	e named entity submits this statement for e of Florida.	the purpose of changing its registere	a office of registered agent, or both	
SIGNATUI	RE:			
	Electronic Signature of Registered	d Agent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM () Delete ELDRIDGE, DAVID C MGRM 635 182ND AVE REDINGTON SHORES, FL 33708	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGR () Delete STRONG, WLILIAM MGR 10642 QUEEN AVE LA MESA, CA 91941	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGR () Delete ELDRIDGE, NANCY MGR 635 182ND AVE E REDINGTON SHORES, FL 33708	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	MGR () Delete STRONG, VIRGINIA MGR	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: DAVID C ELDRIDGE MGRM 04/25/2008