


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 07, 2006 8:00 am
Secretary of State

05-01-2006 90076 010 ****50.00

| | |
|---|---|
| DOCUMENT # L05000014181 |  |
| 1. Entity Name COQUINA COVE LLC | |

| | |
|---|---|
| Principal Place of Business 188 RIVER BEACH DRIVE ORMOND BEACH, FL 32176 US | Mailing Address 188 RIVER BEACH DRIVE ORMOND BEACH, FL 32176 US |
|---|---|

| | | | |
|--------------------------------|---------|---------------------|---------|
| 2. Principal Place of Business | | 3. Mailing Address | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |

| | |
|---|--|
| 07052006 Chg-LLC CR2E083 (11/05) | |
| 4. FEI Number 20-2366826 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required | |

| | |
|--|--|
| 6. Name and Address of Current Registered Agent | |
| JOHNSTON MOEN, DEBORAH 188 RIVER BEACH DRIVE ORMOND BEACH, FL 32176 | |

| | |
|--|----------|
| 7. Name and Address of New Registered Agent | |
| Name | |
| Street Address (P.O. Box Number is Not Acceptable) | |
| City | |
| FL | Zip Code |

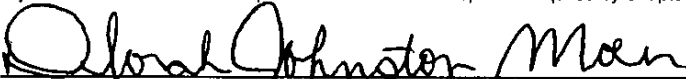
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

| | |
|---|--|
| Filing Fee is \$50.00 Due by September 6, 2006 | Make check payable to Florida Department of State |
|---|--|

| 9. MANAGING MEMBERS/MANAGERS | | 10. ADDITIONS/CHANGES | |
|--|---|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM JOHNSTON MOEN, DEBORAH 188 RIVER BEACH DRIVE ORMOND BEACH, FL 32176 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: 

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30011638 ATTACHMENT

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Accounts Bill Pay & e-Bills Transfer Funds Business Tools Investments Customer Service

Accounts Overview Account Activity Account Summary Find a Transaction

Check Image – Front and Back

Posting Date: 05/11/2006

Check #: 10008

Amount: \$50.00

Reference: 86940625406

Account: DDA-1821

Nickname:

| | | | | | |
|--|--|--|--|--|-------|
| DIAMOND DEVELOPMENT, LLC 188 RIVER BEACH DRIVE ORLANDO BEACH, FL 32178 (325) 453-0243 | | BANK OF AMERICA, NA ORLANDO BEACH, FL 32178 63-47590 | | 20041341 | 10008 |
| PAY TO THE ORDER OF Florida Department of State | | \$ 50.00 | | 4/27/2006 | |
| Fifty and 00/100 | | DOLLARS | | VOID AFTER 60 DAYS | |
| Florida Department of State | | VOID | | ADVANCE - Coquina Cove, LLC - 2006 LLC Annual Report | |
| ⑆010008⑆ ⑆05300004⑆ ⑆005505631821⑆ | | ⑆0000005000⑆ | | | |

| | | | | | |
|--|--|--|--|--|--|
| 188 RIVER BEACH DRIVE ORLANDO BEACH, FL 32178 (325) 453-0243 | | BANK OF AMERICA, NA ORLANDO BEACH, FL 32178 63-47590 | | MAY 01 2006 | |
| 6940625406 9856 65454048043 | | 22 40 46978 | | DO NOT CARRY STAMP OR SIGN BEHIND THIS LINE | |
| 6940625406 9856 65454048043 | | 22 40 46978 | | DEPARTMENT OF STATE FOR DEPOSIT ONLY ACCT # 10098878 | |

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