

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

DOCUMENT # L05000030768

1. Entity Name  
COASTAL VILLAGE, LLC



Principal Place of Business  
8825 EAST TAMiami TRAIL  
NAPLES, FL 34113-3347

Mailing Address  
8825 EAST TAMiami TRAIL  
NAPLES, FL 34113-3347

**FILED**  
**Apr 22, 2008 08:00 AM**  
**Secretary of State**



04152008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 20-4766830	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

BURKE, CONSTANCE M  
1107 WEST MARION AVENUE, SUITE 112  
PUNTA GORDA, FL 33950-5372

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

U00000914042  
05/08/08-80040-022 138.75

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DE LANGE, LUIT MR 8825 TAMiami TRAIL EAST NAPLES, FL 34113
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BOFF, JOSEPH D MR 942 NORTH COLLIER BLVD MARCO ISLAND, FL 34145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BOBROW, JOEL I MR 8825 TAMiami TR EAST NAPLES, FL 34113
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DE LANGE-GARNER, ULRIKE MR 8825 TAMiami TR EAST NAPLES, FL 34113
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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: \_\_\_\_\_

*Ulrike de Lange-Garner* 4/16/08 279-774-5333