

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000037803

FILED
Jan 04, 2006
Secretary of State

Entity Name: COSTA CARINA, LLC

Current Principal Place of Business:

PO BOX 456
DESTIN, FL 32540

New Principal Place of Business:

Current Mailing Address:

PO BOX 456
DESTIN, FL 32540

New Mailing Address:

FEI Number: 20-3259372

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCNEESE, RICHARD S
36468 EMERALD COAST PARKWAY
SUITE 1201
DESTIN, FL 32541 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/MANAGERS:

Title: MGRM () Delete
Name: SPEARS, TIMOTHY D
Address: 646 INDIGO LOOP NORTH
City-St-Zip: MIRAMAR BEACH, FL 32550

Title: MGRM () Delete
Name: BARTON, JAMES L
Address: 5 CANOE COURT
City-St-Zip: DESTIN, FL 32541

Title: MGRM () Delete
Name: BINKLEY, ROSS S
Address: 434 BENNING DRIVE
City-St-Zip: DESTIN, FL 32541

Title: MGRM () Delete
Name: MAINOR, JAMES B
Address: 6115 N. HWY 189
City-St-Zip: BAKER, FL 32531

Title: MGRM () Delete
Name: GUSTIN, SHANNON J
Address: 1200 SLY DRIVE
City-St-Zip: BAKER, FL 32531

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:

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 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: JAMES B. MAINOR

MGRM

01/04/2006

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