2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000037803

Entity Name: COSTA CARINA, LLC

Address:

City-St-Zip:

1200 SLY DRIVE

BAKER, FL 32531

FILED Apr 21, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 721 ASHLEY DRIVE CRESTVIEW, FL 32536 **Current Mailing Address: New Mailing Address:** 721 ASHLEY DRIVE CRESTVIEW, FL 32536 FEI Number: 20-3259372 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCNEESE, RICHARD S 36468 EMÉRALD COAST PARKWAY **SUITE 1201** DESTIN, FL 32541 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Delete (X) Change () Addition SPEARS, TIMOTHY D SPEARS, TIMOTHY D Name: Name: 646 INDIGO LOOP NORTH Address: 7 SOUTHMINSTER COURT Address: City-St-Zip: MIRAMAR BEACH, FL 32550 City-St-Zip: NICEVILLE, FL 32578 Title: MGRM () Delete Title: () Change () Addition BARTON, JAMES L Name: Name: Address: 5 CANOE COURT Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition BINKLEY, ROSS S Name: Name: Address: 434 BENNING DRIVE Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: MAINOR, JAMES B Name: Address: 6102 HOLLOWAY ROAD Address: City-St-Zip: BAKER, FL 32531 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition GUSTIN, SHANNON J Name: Name:

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: TIMOTHY D. SPEARS MGRM 04/21/2009