

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000043121

Entity Name: COYABA GARDENS, LLC

FILED  
Jul 01, 2008  
Secretary of State

**Current Principal Place of Business:**

2485 RIDGECREST AVENUE  
ORANGE PARK, FL 32073

**New Principal Place of Business:**

**Current Mailing Address:**

3600 WESTERN AVENUE  
MATTOON, IL 61938

**New Mailing Address:**

6484 NCR 1320E  
CHARLESTON, IL 61920

FEI Number: 20-2693797      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

AGENTS AND CORPORATIONS, INC  
300 FIFTH AVENUE SOUTH  
SUITE 101-330  
NAPLES, FL 34102 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: GOWIN ENTERPRISES, I, NC.  
Address: 3600 WESTERN AVENUE  
City-St-Zip: MATTOON, IL 61938  
  
Title: MGRM ( ) Delete  
Name: EFFINGHAM STATE BANK, TRUST #690002 3 8324  
Address: 133 WEST JEFFERSON AVENUE  
City-St-Zip: EFFINGHAM, IL 62401

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: GOWIN ENTERPRISES, I, NC.  
Address: 6484 NCR 1320E  
City-St-Zip: CHARLESTON, IL 61920  
  
Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: JASON R. GOWIN

MBR

07/01/2008

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