

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 01, 2006 8:00 am
Secretary of State

09-01-2006 90035 013 ****55.00

DOCUMENT # L05000051183

1. Entity Name
EMERALD COAST FRAMING, LLC



Principal Place of Business
**318 MAIN STREET
DESTIN, FL 32541 US**

Mailing Address
**P.O. BOX 1314
DESTIN, FL 32540 US**

2. Principal Place of Business
56 Inlet Way
Suite, Apt. #, etc.

3. Mailing Address
56 Inlet Way
Suite, Apt. #, etc.



08192006 Chg-LLC CR2E083 (11/05)

City & State
Santa Rosa Beach, FL
Zip
32459 Country
Walton

City & State
Santa Rosa Beach, FL
Zip
32459 Country
Walton

4. FEI Number
32-0150496

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

**RICH, DAVID
318 MAIN STREET
DESTIN, FL 32541**

7. Name and Address of New Registered Agent

Name
Chandra Rich
Street Address (P.O. Box Number is Not Acceptable)
56 Inlet Way
City
Santa Rosa Beach FL Zip Code
32459

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 **David Rich** **Chandra Rich** **8-18-06**
Signature, typed or printed name of registered agent and title if applicable. (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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
PRATHER, CHANDRA J
318 MAIN STREET
DESTIN, FL 32541** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
RICH, DAVID
318 MAIN STREET
DESTIN, FL 32541** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**mgrm
Chandra Rich
56 Inlet Way
Santa Rosa Beach, FL. 32459** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**mgrm
David Rich
56 Inlet Way
Santa Rosa Beach, FL. 32459** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ 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: **Chandra Rich**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

8-18-06 850-685-9907
Date Daytime Phone #