

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000052735

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: ATLANTIC COAST PROPERTIES LLC

**Current Principal Place of Business:**

10 JILL ALISON CIRCLE  
ORMOND BEACH, FL 32176 US

**New Principal Place of Business:**

**Current Mailing Address:**

10 JILL ALISON CIRCLE  
ORMOND BEACH, FL 32176 US

**New Mailing Address:**

FEI Number: 20-3044763

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PEPIN, MICHAEL A  
10 JILL ALISON CIRCLE  
ORMOND BEACH, FL 32176 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: PEPIN, MICHAEL A  
Address: 10 JILL ALISON CIRCLE  
City-St-Zip: ORMOND BEACH, FL 32176 US

Title: MBR (X) Delete  
Name: KELLY, JAMES E  
Address: 12545 ARCOLA TRAIL  
City-St-Zip: STILLWATER, MN 55082 US

Title: MBR (X) Delete  
Name: OTTESON, JOHN  
Address: 873 GOODRICH AVENUE  
City-St-Zip: ST. PAUL, MN 55105 US

Title: MBR (X) Delete  
Name: KANE, MICHAEL O  
Address: 174 SOUTH GULF BOULEVARD  
City-St-Zip: PLACIDA, FL 33946

Title: MBR (X) Delete  
Name: MILLER, SANFORD  
Address: 28 BROAD RIVER ROAD  
City-St-Zip: ORMOND BEACH, FL 32174 US

**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 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: MICHAEL A PEPIN

MGRM

04/30/2008

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