

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000057591

FILED
Apr 28, 2008
Secretary of State

Entity Name: EMERALD COAST ENTERTAINMENT LLC

Current Principal Place of Business:

7 DOGWOOD DR.
SHALIMAR, FL 32579

New Principal Place of Business:

Current Mailing Address:

7 DOGWOOD DR.
SHALIMAR, FL 32579

New Mailing Address:

FEI Number: 20-3027152

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILDER, JIM
102 OAKHILL AVE.
FT. WAKTIN BEACH, FL 32547 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: JERNIGAN, JACKIE
Address: 7 DOGWOOD DR.
City-St-Zip: SHALIMAR, FL 32579

Title: MGRM () Delete
Name: JERNIGAN, SANDRA G
Address: 7 DOGWOOD DR.
City-St-Zip: SHALIMAR, FL 32579

Title: MGR () Delete
Name: JERNIGAN, MICAH D
Address: 7 DOGWOOD DR.
City-St-Zip: SHALIMAR, FL 32579

Title: MGR () Delete
Name: JERNIGAN, LEVI M
Address: 7 DOGWOOD DR.
City-St-Zip: SHALIMAR, FL 32579

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:

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: JACKIE L. JERNIGAN

MGRM

04/28/2008

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