2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000060546

Entity Name: NATURE COAST DEVELOPMENT LLC

2324 GRANDFATHER MTN.

SPRING HILL, FL 34606

Address:

City-St-Zip:

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 15120 COUNTY LINE RD. SUITE 100 SPRING HILL, FL 34610 **New Mailing Address: Current Mailing Address:** 15120 COUNTY LINE RD. SUITE 100 SPRING HILL, FL 34610 FEI Number: 20-3010676 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: KOENIG, WILLIAM T III 15120 COUNTY LINE RD. SUITE 100 SPRING HILL, FL 34610 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 () Delete Title: () Change () Addition KOENIG, WILLIAM T III Name: Name: Address: 1136 FINLAND DR. Address: City-St-Zip: SPRING HILL, FL 34609 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: SEIDEN, KATHLEEN E Name: Address: 4 LOOKOVER DRIVE Address: City-St-Zip: HEWITT, NJ 07421 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition DOYLE, TIMOTHY 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: WILLIAM T. KOENIG III MGR 04/30/2009