## 2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000070849

Entity Name: COASTWIDE EQUIPMENT, LLC

**FILED** Sep 13, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

8666 SEMINOLE BLVD. 2840 WEST BAY DRIVE SEMINOLE, FL 33772

#288

BELLEAIR BLUFFS, FL 33770

**Current Mailing Address: New Mailing Address:** 

8666 SEMINOLE BLVD. 2840 WEST BAY DRIVE SEMINOLE, FL 33772

#288 LARGO, FL 33770

FEI Number: 20-3166256 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:

KEWE UNLIMITED, INC. KEWE UNLIMITED, INC. 8666 SEMINOLE BLVD. 2401 WEST BAY DRIVE SEMINOLE, FL 33772 US SUITE 124 LARGO, FL 33770 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: THERESA L. WEBER 09/13/2006

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM () Delete Title: (X) Change ( ) Addition

COASTWIDE DISASTER R, ELIEF & RECOVE R Y, LLC COASTWIDE DISASTER R, ELIEF & RECOVE R Y, LLC Name: Name:

Address: 8666 SEMINOLE BLVD. Address: 2840 WEST BAY DRIVE #288

City-St-Zip: SEMINOLE, FL 33772 City-St-Zip: LARGO, FL 33770

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: THERESA L. WEBER 09/13/2006