2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 18, 2008 08:00 A Secretary of State

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DOCUMENT # L05000071388				_	been etaily of S
1. Entity Nar					
EAST CO	DAST LAND HOLDINGS,	LLC	HE TOTAL		
Principal Plac	ce of Business	Mailing Address			
308 AVENU		308 AVENUE A			
FT. PIERCE,	FL 34950	FT. PIERCE, FL 34950			
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:	<u> Name of the State of the Stat</u>	Same of the case o		03042008 No Chg-LLC	CR2E083 (12/07)
	O NOT WRIT	E IN THIS SP	ACE	4. FEI Number	Applied For
				20-3188477	Not Applicable
 	, ,	a page of the page of the second		5. Certificate of Status Desired	\$5.00 Additional
	6. Name and Address of Curre		· · · · · · · · ·		Fee Required
			 .		
OSTEEN, WILLIAM D			t.	DO NOT W	RITE
308 AVENUE A FT. PIERCE, FL 34950				and the second second	
				IN THIS SP	ACE
8. The above	named entity submits this statemen	for the purpose of changing its reg	istered office or register	ed agent, or both, in the State of Flor	rida. Lam familiar with and accept
the obliga	tions of registered agent.	To the parpoon of one lightly to rog	ioto. od omeo or registion	od agont, or both, in the bittle of the	ida. Tarifibiliai with and accept
) SIGNATURE.					
	Signature, typed or printed name of registered ag	ent and title if applicable (NOTE Re	gistered Agent signature required		DATE
FILE	E NOW!!! FEE IS \$138.75			U0900 om tom tod	0906698 -80008-022 138.75
After Ma	y 1, 2008 Fee will be \$538.	75		05/05/08	-80008-822 [38.75
9.	MANAGING MEM	BERS/MANAGERS	<u> </u>		
TOTE	MGR		:		
NAME	OSTEEN, WILLIAM D		:		
STREET ADDRESS CITY-ST-ZIP	7026 SE HARBOR CIRCLE STUART, FL 34996		:		
TITLE	MGR	-			
NAME	OSTEEN, PAUL A				
STREET ADDRESS	231 RIVERWAY DR.				
CITY-ST-ZIP	VERO BEACH, FL 32963	·			
TITLE			•		
NAME STREET ADORESS					
CITY-ST-ZIP			ı	DO NOT W	RITE
TITLE					
NAME				IN THIS SP	ACE
STREET ADDRESS					
CITY+ST-ZIP		<u> </u>	i		
TITLE			ı		
NAME STREET ADDRESS			i .		
CITY-ST-ZIP			J [*]		
TITLE					
NAME					
NAME STREET ADDRESS					

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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

SIGNATURE:

(772) 461-1700