

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000074362

FILED
Jan 12, 2008
Secretary of State

Entity Name: TNT COASTAL PROPERTIES LLC

Current Principal Place of Business:

4811 ATLANTIC BOULEVARD
JACKSONVILLE, FL 32207

New Principal Place of Business:

3744 DUPONT STATION CT. S.
JACKSONVILLE, FL 32217

Current Mailing Address:

4811 ATLANTIC BOULEVARD
JACKSONVILLE, FL 32207

New Mailing Address:

3744 DUPONT STATION CT. S.
JACKSONVILLE, FL 32217

FEI Number: 20-3205062

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EIKNER, TOD B
4811 ATLANTIC BOULEVARD
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

EIKNER, TOD B
3744 DUPONT STATION CT. S.
JACKSONVILLE, FL 32217 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: TOD B. EIKNER

01/12/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: EIKER, TOD B
Address: 4811 ATLANTIC BOULEVARD
City-St-Zip: JACKSONVILLE, FL 32207

Title: MGR (X) Delete
Name: JOHNS, THEODORE M VP
Address: 4811 ATLANTIC BLVD.
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: EIKNER, TOD B
Address: 3744 DUPONT STATION CT. S.
City-St-Zip: JACKSONVILLE, FL 32217

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: TOD B. EIKNER

MGRM

01/12/2008

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