

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000080960

Entity Name: MYCOASTALPROPERTY, LLC

FILED
Aug 10, 2006
Secretary of State

Current Principal Place of Business:

2744 ASTON WOODS LANE
THOMPSONS STATION, TN 37179

New Principal Place of Business:

209 SOUTH ZANDER WAY
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

2744 ASTON WOODS LANE
THOMPSONS STATION, TN 37179

New Mailing Address:

1516 CHAPMAN LANE
SPRING HILL, TN 37174

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MCNEESE, RICHARD S
36468 EMERALD COAST PARKWAY
SUITE 1201
DESTIN, FL 32541 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: DIEBOLT, SUSAN
Address: 2744 ASTON WOODS LANE
City-St-Zip: THOMPSONS STATION, TN 37179

Title: MGRM () Delete
Name: EICHNER, JERRY
Address: 2744 ASTON WOODS LANE
City-St-Zip: THOMPSONS STATION, TN 37179

Title: MGRM () Delete
Name: BROOKS, JOE A
Address: 8716 STABLEMILL LANE
City-St-Zip: CORDOVA, TN 38016

Title: MGRM () Delete
Name: BROOKS, LEANNE M
Address: 8716 STABLEMILL LANE
City-St-Zip: CORDOVA, TN 38016

Title: MGRM () Delete
Name: DUFOR, BARBARA S
Address: 8940 LEAF TRAIL COVE
City-St-Zip: CORDOVA, TN 38018

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DIEBOLT, SUSAN
Address: 1516 CHAPMAN LANE
City-St-Zip: SPRING HILL, TN 37174

Title: MGRM (X) Change () Addition
Name: EICHNER, JERRY
Address: 1516 CHAPMAN LANE
City-St-Zip: SPRING HILL, TN 37174

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 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: SUSAN DIEBOLT

MGRM

08/10/2006

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