


# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 25, 2007 8:00 am**  
**Secretary of State**

04-25-2007 90041 023 \*\*\*\*50.00

<b>DOCUMENT # L05000102597</b>	
1. Entity Name <b>COASTAL DEVELOPMENT OF PENSACOLA, LLC</b>	

Principal Place of Business <b>512 EVENTIDE DRIVE GULF BREEZE, FL 32561 US</b>	Mailing Address <b>512 EVENTIDE DRIVE GULF BREEZE, FL 32561 US</b>
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**60040478**



2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

03312007 Chg-LLC CR2E083 (12/06)

4. FEI Number <b>20-3673974</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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<b>6. Name and Address of Current Registered Agent</b>
<b>WALKER &amp; TRAVIS INVESTMENTS, INC. 512 EVENTIDE DRIVE GULF BREEZE, FL 32561</b>

<b>7. Name and Address of New Registered Agent</b>
Name <b>WALKER &amp; TRAVIS INVESTMENTS INC.</b>
Street Address (P.O. Box Number is Not Acceptable) <b>4530 Bohemia DRIVE</b>
City <b>Pensacola</b> FL Zip Code <b>32504</b>

8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE <i>Craig D. Walker</i> <b>CRAIG D. WALKER</b> PRESIDENT	DATE <b>4/15/07</b>

<b>Filing Fee is \$50.00 Due by May 1, 2007</b>	<b>Make check payable to Florida Department of State</b>
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR WALKER &amp; TRAVIS INVESTMENTS, INC 512 EVENTIDE DRIVE GULF BREEZE, FL 32561</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR WALKER &amp; TRAVIS INVESTMENTS INC. 4530 Bohemia DRIVE Pensacola FL 32504</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

<b>SIGNATURE:</b> <i>Craig D. Walker</i> <b>CRAIG D. WALKER</b>	Date <b>4/15/07</b>	Daytime Phone # <b>(850) 434-3400</b>
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