

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000120388

**FILED**  
**Apr 15, 2012**  
**Secretary of State**

**Entity Name:** COASTAL RESORTS ON LINE, L.L.C.

**Current Principal Place of Business:**

232 STANLEY PARK LANE  
FRANKLIN, TN 37069

**New Principal Place of Business:**

**Current Mailing Address:**

232 STANLEY PARK LANE  
FRANKLIN, TN 37069

**New Mailing Address:**

**FEI Number:** 84-1697680

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TIPPS, JAMES  
16860 US HWY 19N LOT 239  
CLEARWATER, FL 33764 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:** MGR  
**Name:** HIGH, CATHY  
**Address:** 232 STANLEY PARK LANE  
**City-St-Zip:** FRANKLIN, TN 37069

**Title:** PS  
**Name:** HIGH, CATHY  
**Address:** 232 STANLEY PARK LANE  
**City-St-Zip:** FRANKLIN, TN 37069

I hereby 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:** CATHY HIGH

MGR

04/15/2012

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