2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 30, 2008
Secretary of State

DOCUMENT# L06000010532

Entity Name: COASTAL COLOR PAINT SERVICES, LLC.

Current Principal Place of Business:

5 WILLARD DRIVE
650
ST. AUGUSTINE, FL 32086

New Principal Place of Business:

Current Mailing Address:

5 WILLARD DRIVE
650
ST. AUGUSTINE, FL 32086

New Mailing Address:

FEI Number: 20-0257157 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DE JONGE, CRAIG R
5 WILLARD DRIVE
650
ST. AUGUSTINE, FL 32086 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: PRES ( ) Delete
Name: DE JONGE, CRAIG R
Address: 5 WILLARD DR. SUITE 650
City-St-Zip: ST. AUG, FL 32086

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ASST ( ) Change (X) Addition
Name: DE JONGE, MEGAN L ASST.
Address: 5 WILLARD DRIVE, SUITE 650
City-St-Zip: ST. AUGUSTINE, FL 32086

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: CRAIG R. DE JONGE PRES 03/30/2008

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