

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000023876

Entity Name: COASTAL DOCKS, LLC

FILED
Apr 08, 2009
Secretary of State

Current Principal Place of Business:

68 COCO PLUM DR
MARATHON, FL 33050

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 522500
MARATHON SHORES, FL 33052

New Mailing Address:

FEI Number: 86-1162922

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOGEBROOM, JAN
57805 MORTON STREET
MARATHON, FL 33050 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: HOGEBROOM, JAN
Address: 57805 MORTON STREET
City-St-Zip: MARATHON, FL 33050

Title: MGRM () Delete
Name: SCHILF, ROGER
Address: 12400 OVERSEAS HWY
City-St-Zip: MARATHON, FL 33050

Title: MGRM () Delete
Name: JUDSON, SHERWOOD
Address: 57805 MORTON ST
City-St-Zip: MARATHON, FL 33050

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: SCHILF, ROGER
Address: 57805 MORTON ST
City-St-Zip: MARATHON, FL 33050

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: JAN HOGEBROOM

MGRM

04/08/2009

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