2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 13, 2008
Secretary of State

DOCUMENT# L06000057785

Entity Name: COASTAL JOINT VENTURES, LLC

Current Principal Place of Business:

716 W. PT. WASHINGTON RD.
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

Current Mailing Address:

716 W. PT. WASHINGTON RD.
SANTA ROSA BEACH, FL 32459

New Mailing Address:

FEI Number: 20-4997846 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **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:

DAVIS, TIFFANY
716 W. PT. WASHINGTON RD.
SANTA ROSA BEACH, FL 32459 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:	DAVIS, TIFFANY	
Address:	716 W. PT. WASHINGTON RD.	
City-St-Zip:	SANTA ROSA BEACH, FL 32459	
Title:	MGRM	( ) Delete
Name:	OWEN, PHILLIP C	
Address:	355 MULLET DR.	
City-St-Zip:	FREEPORT, FL 32439	
Title:	MGRM	( ) Delete
Name:	OWEN, CHRISTINE	
Address:	355 MULLET DR.	
City-St-Zip:	FREEPORT, FL 32439	
Title:	MGRM	( ) Delete
Name:	DAVIS, JEFFREY A	
Address:	716 W. PT. WASHINGTON	
City-St-Zip:	SANTA ROSA BEACH, FL 32459	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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: TIFFANY DAVIS MGRM 05/13/2008

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