2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 11, 2009
Secretary of State

DOCUMENT# L06000058967

Entity Name: ATLANTIC COAST LLC

Current Principal Place of Business:

6064 SABAL CREEK BLVD
PORT ORANGE, FL 32128

New Principal Place of Business:

Current Mailing Address:

6064 SABAL CREEK BLVD
PORT ORANGE, FL 32128

New Mailing Address:

FEI Number: 20-5264965 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRATU, CATALIN
6064 SABAL CREEK BLVD
PORT ORANGE, FL 32128 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 ( ) Delete
Name: ZULFIQAR, HASSAN
Address: 1849 S. PALMETTO AVENUE
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: MGR ( ) Delete
Name: KAKEZAI, SOHAIL
Address: 74 COQUINA RIDGEWAY
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGR ( ) Delete
Name: BRATU, CATALIN
Address: 6064 SABAL CREEK BLVD
City-St-Zip: PORT ORANGE, FL 32128

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:

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: CATALIN BRATU MGR 02/11/2009

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