


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Feb 15, 2007 8:00 am
Secretary of State

02-15-2007 90278 019 ****50.00

DOCUMENT # L06000062044			
1. Entity Name EAST COAST DESIGN CENTER, LLC			
Principal Place of Business 3814 N. 29TH AVENUE HOLLYWOOD FL 33020		Mailing Address 3814 N. 29TH AVENUE HOLLYWOOD FL 33020	
2. Principal Place of Business - No P.O. Box # 222 N. FEDERAL HWY Suite, Apt. #, etc. #1		3. Mailing Address 222 N. FEDERAL HWY Suite, Apt. #, etc. #1	
City & State DANIA BEACH, FL Zip 33004 Country USA		City & State DANIA BEACH, FL Zip 33004 Country	
6. Name and Address of Current Registered Agent GASKILL, KATE G 3814 N. 29TH AVENUE HOLLYWOOD FL 33020		7. Name and Address of New Registered Agent Name KATE G. GASKILL Street Address (P.O. Box Number is Not Acceptable) 222 N. FEDERAL HWY #1 City DANIA BEACH FL Zip Code 33004	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Kate G. Gaskill</u> (NOTE: Registered Agent signature required when reinstating) DATE			
		FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2007	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY ST ZIP	MGR GASKILL, KATE G 3814 N. 29TH AVENUE HOLLYWOOD FL 33020 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	MGR GASKILL, BRIAN C 3814 N. 29TH AVENUE HOLLYWOOD FL 33020 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	MGR GRAVES, GYPSY C 3814 N. 29TH AVENUE HOLLYWOOD FL 33020 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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1st MOORE CR2E083 (10/06)

4. FEI Number 83-0461276 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

2/7/07 (954) 445-2604