

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000079313

**FILED**  
**Apr 16, 2010**  
**Secretary of State**

**Entity Name:** FULLER COASTAL CONDOS, LLC

**Current Principal Place of Business:**

5115 THOMAS DRIVE  
3RD FLOOR CLUBHOUSE  
PANAMA CITY BEACH, FL 32408

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 28105  
PANAMA CITY, FL 32411

**New Mailing Address:**

**FEI Number:** 20-5389878

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BLUE, ROB JR  
221 MCKENZIE AVENUE  
PANAMA CITY, FL 32401 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  
**Name:** FULLER, CHARLES W  
**Address:** PO BOX 28105  
**City-St-Zip:** PANAMA CITY, FL 32411

**Title:** MGRM  
**Name:** FULLER, HOLLY M  
**Address:** 1022 BARRACUDA DRIVE  
**City-St-Zip:** PANAMA CITY BEACH, FL 32408

**Title:** MGRM  
**Name:** FULLER, CHASE N  
**Address:** 1022 BARRACUDA DRIVE  
**City-St-Zip:** PANAMA CITY BEACH, FL 32408

**Title:** MGRM  
**Name:** FULLER, EMMA G  
**Address:** 1022 BARRACUDA DRIVE  
**City-St-Zip:** PANAMA CITY BEACH, FL 32408

I hereby 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:** CHARLES W. FULLER

MGR

04/16/2010

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