

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000093105

FILED
Sep 04, 2008
Secretary of State**Entity Name:** COASTAL JANITORIAL SERVICES LLC**Current Principal Place of Business:**169 GRIFFIN BLVD
SUITE 104
PANAMA CITY BEACH, FL 32413**New Principal Place of Business:****Current Mailing Address:**169 GRIFFIN BLVD
SUITE 104
PANAMA CITY BEACH, FL 32413**New Mailing Address:****FEI Number:** 20-5588096**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: BEAUCHENE, LISA
Address: 512 GULFVIEW DR
City-St-Zip: PANAMA CITY BCH, FL 32413

Title: MGRM () Delete
Name: CLARK, LARRY
Address: 512 GULF VIEW DR
City-St-Zip: PANAMA CIYT BEACH, FL 32413

Title: MGRM () Delete
Name: MCLEOD, COREY
Address: 512 GULFVIEW DR
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: MGRM () Delete
Name: MCCULLOUGH, CAMERON E
Address: 108 AVE C
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CLARK, LISA L
Address: 512 GULFVIEW DR
City-St-Zip: PANAMA CITY BCH, FL 32413

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

Title: MGRM (X) Change () Addition
Name: MCLEOD, COREY
Address: 200 SANDAL LANE APT 211
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: MGRM (X) Change () Addition
Name: MCCULLOUGH, CAMERON E
Address: 818 AVE C
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: MGRM () Change (X) Addition
Name: WILLIS, MARY H
Address: 200 SANDAL LANE APT 211
City-St-Zip: PANAMA CITY BEACH, FL 32413

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: LISA L CLARK

MGR

09/04/2008

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