

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000102591

FILED
May 01, 2007
Secretary of State

Entity Name: EAST COAST PARKING SERVICES LLC

Current Principal Place of Business:

11 EAST FORSYTH STREET #1401
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

11 EAST FORSYTH STREET #1401
JACKSONVILLE, FL 32202

New Mailing Address:

FEI Number: 20-5734927 **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:

Name and Address of New Registered Agent:

FLORIDA INCORPORATORS, INC.
8875 HIDDEN RIVER PKWY STE. 300
TAMPA, FL 33637 US

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: HOLLOMAN, GREGORY R
Address: 11 EAST FORSYTH STREET #1401
City-St-Zip: JACKSONVILLE, FL 32202

Title: MGRM () Delete
Name: GUDE, ORTEZ
Address: 31 WEST ADAMS #1407
City-St-Zip: JACKSONVILLE, FL 32202

Title: MGRM () Delete
Name: BROWNING, COLLIN
Address: 1001 CARLISLE CIRCLE
City-St-Zip: GRAND LEDGE, MI 48837

Title: MGRM () Delete
Name: HALL, KENNETH L JR.
Address: 538 HILLCREST CROSS RD.
City-St-Zip: CANTON, GA 30115

Title: MGRM (X) Delete
Name: SMITH, JAMAR
Address: 13656 DEVAN LEE DRIVE
City-St-Zip: JACKSONVILLE, FL 32226

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:

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: GREGORY R. HOLLOMAN

MGRM

05/01/2007

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