2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000120117

Entity Name: EMERALD COAST DIVERSIFIED FWB, L.L.C.

EMERALD COAST EYE PA, RTNERS, L.L.C.

1034 MAR WALT DRIVE, STE. 200

FORT WALTON BEACH, FL 32547

Name:

Address:

City-St-Zip:

FILED Feb 11, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1034 MAR WALT DRIVE SUITE 310 FORT WALTON BEACH, FL 32547 **New Mailing Address: Current Mailing Address:** 1034 MAR WALT DRIVE SUITE 310 FORT WALTON BEACH, FL 32547 FEI Number: 20-8059118 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MARSHALL, WILLIAM MARSHALL, WILLIAM R 1034 MAR WALT DRIVE 1034 MAR WALT DRIVE SUITE 310 SUITE 310 FORT WALTON BEACH, FL 32547 US FORT WALTON BEACH, FL 32547 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: WILLIAM R. MARSHALL 02/11/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete MARSHALL HOLDINGS, L, .L.C. Name: Name: 1034 MAR WALT DRIVE, STE 310 Address: Address: City-St-Zip: FORT WALTON BEACH, FL 32547 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MACEY FAMILY MANAGEM, ENT, L.L.C. Name: Name: Address: 1034 MAR WALT DRIVE, STE, 310 Address: City-St-Zip: FORT WALTON BEACH, FL 32547 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition THE J&A THACKERAY FA, MILY MANAGEMEN T CO., L Name: Name: Address: 6314 AUGUSTA COVE Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: WILLIAM R. MARSHALL MGMR 02/11/2009