

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000020804

FILED  
Jan 15, 2009  
Secretary of State

**Entity Name:** COAST TO COAST MODELS & EVENTS LLC

**Current Principal Place of Business:**

1843 WISCONSON AVE.  
PALM HARBOR, FL 34683

**New Principal Place of Business:**

**Current Mailing Address:**

1843 WISCONSON AVE.  
PALM HARBOR, FL 34683

**New Mailing Address:**

**FEI Number:** 90-0298381

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COAST 2 COAST CONSULTING  
3668 SOUTH RIDGE CIRCLE  
TITUSVILLE, FL 32796 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: CEO ( ) Delete  
Name: TANCRELL, KYLE M  
Address: 1843 WISCONSON AVE.  
City-St-Zip: PALM HARBOR, FL 34683

Title: COO ( ) Delete  
Name: TANCRELL, KATE E  
Address: 1843 WISCONSON AVE.  
City-St-Zip: PALM HARBOR, FL 34683

Title: CMO ( ) Delete  
Name: TANCRELL, CHRISTOPHER R  
Address: 2120 KNOLL LN.  
City-St-Zip: GERMANTOWN, TN 38138

Title: CIO ( ) Delete  
Name: TANCRELL, KENNETH M  
Address: 3668 SOUTH RIDGE CIRCLE  
City-St-Zip: TITUSVILLE, FL 32796

**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:

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: KYLE M. TANCRELL

CEO

01/15/2009

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