

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000061449

FILED
Apr 30, 2009
Secretary of State

Entity Name: ALL COASTAL PROPERTIES, LLC

Current Principal Place of Business:

110 S.E. 10TH ST.
CARRABELLE, FL 32322

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 383
28-1 PARKER AVE.
LANARK VILLAGE, FL 32323

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIBBS, JERRY J
301 MARINE ST.
CARRABELLE, FL 32322 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: MGRM () Delete
Name: THOMAN, SHARON L
Address: 28-1 PARKER AVE. , P.O. BOX 383
City-St-Zip: LANARK VILLAGE, FL 32323

Title: MGRM () Delete
Name: GIBBS, JERRY J
Address: 301 MARINE ST., P.O. BOX 737
City-St-Zip: CARRABELLE, FL 32322

ADDITIONS/CHANGES:

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: SHARON L. THOMAN

MGRM

04/30/2009

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