

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000082046

Entity Name: COASTAL ENTITIES LLC

FILED  
May 18, 2008  
Secretary of State

**Current Principal Place of Business:**

4541 11TH AVE. S.W.  
NAPLES, FL 34116 US

**New Principal Place of Business:**

**Current Mailing Address:**

4541 11TH AVE. S.W.  
NAPLES, FL 34116 US

**New Mailing Address:**

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

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD  
SUITE A-100  
TAMPA, FL 336123425 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: MGR ( ) Delete  
Name: GETMAN, ZACHARY  
Address: 4541 11TH AVE. S.W.  
City-St-Zip: NAPLES, FL 34116 US

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

**ADDITIONS/CHANGES:**

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

Title: MGRM ( ) Change (X) Addition  
Name: GETMAN, JENNIFER  
Address: 4541 11TH AVE S.W.  
City-St-Zip: NAPLES, FL 34116

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: ZACHARY GETMAN

MGR

05/18/2008

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