

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000092215

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Entity Name:** COASTAL MARINA MANAGEMENT II, LLC

**Current Principal Place of Business:**

2100 THOMAS DR.  
PANAMA CITY BEACH, FL 32408

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 27789  
PANAMA CITY, FL 32411

**New Mailing Address:**

**FEI Number:** 26-0875267

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GALATI, JOSEPH  
900 SOUTH BAY BOULEVARD  
ANNA MARIA, FL 34216 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  
Name: GMI HOLDING COMPANY  
Address: PO BOX 862  
City-St-Zip: ANNA MARIA, FL 34216

Title: MGRM  
Name: SERVICE AFLOAT, INC.  
Address: PO BOX 27789  
City-St-Zip: PANAMA CITY, FL 32411

I hereby 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: WILLIAM D. BURT

M

03/15/2011

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