

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000120709

FILED
Mar 31, 2009
Secretary of State

Entity Name: COASTAL LENDING & REAL ESTATE LLC

Current Principal Place of Business:

309 LAKE AVENUE
LAKE WORTH, FL 33460 US

New Principal Place of Business:

Current Mailing Address:

309 LAKE AVENUE
LAKE WORTH, FL 33460 US

New Mailing Address:

FEI Number: 26-1515606

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DURAN, JOHN J
244 WALTON HEATH DR.
ATLANTIS, FL 33462 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: DURAN, JOHN J
Address: 244 WALTON HEATH DR.
City-St-Zip: ATLANTIS, FL 33462 US

Title: MGRM () Delete
Name: WAGNER, KENNETH A II
Address: 226 MONROE DRIVE
City-St-Zip: WEST PALM BEACH, FL 33405 US

Title: MGRM () Delete
Name: PERRY, JASON A
Address: 618 KANUGA DRIVE
City-St-Zip: WEST PALM BEACH, FL 33401 US

ADDITIONS/CHANGES:

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

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

Title: MGRM (X) Change () Addition
Name: PERRY, JASON A
Address: 2544 GARDENS PARKWAY
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

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: JOHN DURAN

MGRM

03/31/2009

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