

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000030255

Entity Name: COAST INSURANCE, LLC

FILED  
Apr 30, 2009  
Secretary of State

## Current Principal Place of Business:

14452 BRUCE B DOWNS BLVD  
SUITE 113  
TAMPA, FL 33613

## New Principal Place of Business:

27356 CASHFORD CIR.  
SUITE 102  
WESLEY CHAPEL, FL 33544

## Current Mailing Address:

14452 BRUCE B DOWNS BLVD  
SUITE 113  
TAMPA, FL 33613

## New Mailing Address:

27356 CASHFORD CIR.  
SUITE 102  
WESLEY CHAPEL, FL 33544

FEI Number: 26-1689575

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SAWICKI, DORSEY D  
14452 BRUCE B DOWNS BLVD  
SUITE 113  
TAMPA, FL 33613 US

## Name and Address of New Registered Agent:

SAWICKI, DORSEY D  
27356 CASHFORD CIR.  
SUITE 102  
WESLEY CHAPEL, FL 33544 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: DORSEY D SAWICKI

04/30/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: SAWICKI, DORSEY D  
Address: 1148 BIG SKY DRIVE  
City-St-Zip: WESLEY CHAPEL, FL 33543

## ADDITIONS/CHANGES:

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: DORSEY D SAWICKI

MGR

04/30/2009

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