

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000046134

**FILED**  
**Apr 15, 2012**  
**Secretary of State**

**Entity Name:** COASTAL PET SERVICES, LLC

**Current Principal Place of Business:**

1229 LOCKSLEY LANE  
PONTE VEDRA, FL 32081

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 1155  
PONTE VEDRA BEACH, FL 320041155

**New Mailing Address:**

POST OFFICE BOX 1155  
PONTE VEDRA BEACH, FL 32004

**FEI Number:** 26-2577627

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RODISH, TERRI M  
1229 LOCKSLEY LANE  
PONTE VEDRA, FL 32081 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: RODISH, TERRI M  
Address: 1113 RAVENSCROFT LANE  
City-St-Zip: PONTE VEDRA, FL 32081

Title: MGR  
Name: RODISH, WILLIAM R  
Address: 1113 RAVENSCROFT LANE  
City-St-Zip: PONTE VEDRA, FL 32081

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: TERRI M RODISH

MGRM

04/15/2012

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