## 2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

## DOCUMENT# L08000048324

Entity Name: EMERALD COAST HOME OPTIONS, LLC

FILED Jun 05, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 316 TIPPERARY WAY NICEVILLE, FL 32578 US **Current Mailing Address: New Mailing Address:** 316 TIPPERARY WAY NICEVILLE, FL 32578 US FEI Number: 26-3432764 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RANDALL, ROBBYE L 320 OAK LAKE LANE NICEVILLE, FL 32578 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: ADDITIONS/CHANGES: MGRM Title: MGRM () Delete (X) Change ( ) Addition SCHLADENHAUFFEN, BENJAMIN G **PRESIDENT** Name: Name: Address: 316 TIPPERARY WAY Address: 320 OAKLAKE LANE City-St-Zip: NICEVILLE, FL 32578 US City-St-Zip: NICEVILLE, FL 32578 US Title: Title: MGR ( ) Change (X) Addition ( ) Delete Name: Name: SCHLADENHAUFFEN, SARAH A Address: Address: 316 TIPPERARY WAY City-St-Zip: City-St-Zip: NICEVILLE, FL 32578 US Title: () Delete Title: MGR ( ) Change (X) Addition RANDALL, ROBBYE L Name: Name: 320 OAK LAKE LANE Address: Address: City-St-Zip: City-St-Zip: NICEVILLE, FL 32578 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: R. RANDALL MGRM 06/05/2009