2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 18, 2009
Secretary of State

DOCUMENT# L08000083694

Entity Name: COASTAL LAND COMPANY OF NW FLORIDA, LLC

Current Principal Place of Business:

2104 THOMAS DRIVE
PANAMA CITY BEACH, FL 32408

New Principal Place of Business:

Current Mailing Address:

PO BOX 27279
PANAMA CITY BEACH, FL 32411

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COUNTS, STEVE
2104 THOMAS DRIVE
PANAMA CITY BEACH, FL 32408 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:	COUNTS, STEVE	
Address:	PO BOX 27279	
City-St-Zip:	PANAMA CITY BEACH, FL 32411	
Title:	MGRM	( ) Delete
Name:	OAKES, JASON	
Address:	PO BOX 9975	
City-St-Zip:	PANAMA CITY BEACH, FL 32417	
Title:	MGRM	( ) Delete
Name:	RICHARD GARY LARK, A, S TENANT	
Address:	2313 MAGNOLIA DRIVE	
City-St-Zip:	PANAMA CITY BEACH, FL 32408	
Title:	MGRM	( ) Delete
Name:	SARAH LARK, AS TENAN, T	
Address:	2313 MAGNOLIA DRIVE	
City-St-Zip:	PANAMA CITY BEACH, FL 32408	
Title:		( ) Delete
Name:		
Address:		
City-St-Zip:		

ADDITIONS/CHANGES:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	MGRM	( ) Change (X) Addition
Name:	RODDAM, JAMES	
Address:	P O BOX 1492	
City-St-Zip:	LYNN HAVEN, FL 32444	

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: STEVE COUNTS MGRM 02/18/2009

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