

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000114361

FILED
Mar 22, 2011
Secretary of State

Entity Name: COASTAL CONCIERGE SERVICES, L.L.C.

Current Principal Place of Business:

1586 GOLDEN HARVEST LN.
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

1586 GOLDEN HARVEST LN.
NAPLES, FL 34109

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GRANT, CARTER M
1586 GOLDEN HARVEST LANE
NAPLES, FL 34109 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: GRANT, CARTER M
Address: 1586 GOLDEN HARVEST LANE
City-St-Zip: NAPLES, FL 34109

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: CARTER M. GRANT

PRES

03/22/2011

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