

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000014533

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

**Entity Name:** EMERALD COAST INVESTMENT TRUST LLC

**Current Principal Place of Business:**

533 EGLIN PKWY NE  
SUITE 106  
FORT WALTON BEACH, FL 32547

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 6672  
MIRAMAR BEACH, FL 32550

**New Mailing Address:**

**FEI Number:** 68-0677975

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALL SEASONS PROPERTIES, INC.  
533 EGLIN PARKWAY NE  
SUITE 106  
FORT WALTON BEACH, FL 32547 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:** LUKIN, VOLODYMYR  
**Address:** 56 KORCHAGINA STREET, SUITE #57  
**City-St-Zip:** SEVASTOPOL, CR 99058 UA

**Title:** MGRM  
**Name:** LUKINA, LYUDMYLA  
**Address:** 56 KORCHAGINA STREET, SUITE #57  
**City-St-Zip:** SEVASTOPOL, CR 99058 UA

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:** LYUDMYLA LUKINA

MGRM

04/25/2011

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