

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000065047

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** COASTAL ELITE, LLC

**Current Principal Place of Business:**

1112 NEW JERSEY AVENUE  
LYNN HAVEN, FL 32444 US

**New Principal Place of Business:**

**Current Mailing Address:**

2310 S HWY 77 SUITE 110  
PMB 180  
LYNN HAVEN, FL 32444 US

**New Mailing Address:**

**FEI Number:** 27-3004926      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

JOHNSTON III, PAUL  
1112 NEW JERSEY AVENUE  
LYNN HAVEN, FL 32444 US

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

JOHNSTON, PAUL C III  
1112 NEW JERSEY AVENUE  
LYNN HAVEN, FL 32444 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: PAUL C. JOHNSTON III

04/30/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** JOHNSTON, PAUL C III  
**Address:** 1112 NEW JERSEY AVENUE  
**City-St-Zip:** LYNN HAVEN, FL 32444 US

**Title:** MGR  
**Name:** JOHNSTON, PAUL SR  
**Address:** 128 CALDWELL RD  
**City-St-Zip:** WEST MONROE, LA 71921 US

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: PAUL C. JOHNSTON III

MGRM

04/30/2012

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