2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 22, 2011
Secretary of State

DOCUMENT# L98000003123

Entity Name: COASTAL AFFILIATE, L.L.C.

Current Principal Place of Business:

3401 PHILIPS HWY
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

3401 PHILIPS HWY
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 59-3547744 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARRELL, WILLIAM H
3401 PHILLIPS HWY
JACKSONVILLE, FL 32207 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: HARRELL, WILLIAM H
Address: 3401 PHILIPS HWY
City-St-Zip: JACKSONVILLE, FL 32207

Title: MGRM
Name: ALLCORN, FRANK W IV
Address: 3401 PHILIPS HWY
City-St-Zip: JACKSONVILLE, FL 32207

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 Statues.

SIGNATURE: WILLIAM H HARRELL MGRM 04/22/2011

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