

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED

Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # L99000003824

1. Entity Name

INTERCOASTAL INVESTORS, L.L.C.



Principal Place of Business

ONE SAN JOSE PLACE, SUITE 7
JACKSONVILLE FL 32257

Mailing Address

ONE SAN JOSE PLACE, SUITE 7
JACKSONVILLE FL 32257



2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

1st MOORE

CR2E083 (10/05)

City & State

City & State

4. FEI Number

59-3586259

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

SMITH, HAWLEY V JR.
ONE SAN JOSE PL. SUITE 7
JACKSONVILLE FL 32257

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2006

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGR ☐ Delete
NAME SMEEVE, SMEEVE, SMASH & SMEEVE, L.C.
STREET ADDRESS ONE SAN JOSE PLACE, SUITE 7
CITY-ST-ZIP JACKSONVILLE FL 32257

TITLE ☐ Change ☐ Add
NAME ☐ Change ☐ Add
STREET ADDRESS 1100000533488
CITY-ST-ZIP 05/06/06-80123-024 SU.00

TITLE V ☐ Delete
NAME DUNGEY, MARY LOUISE
STREET ADDRESS 12844 BAY PLANTATION DR.
CITY-ST-ZIP JACKSONVILLE FL 32223

TITLE ☐ Change ☐ Add
NAME ☐ Change ☐ Add
STREET ADDRESS ☐ Change ☐ Add
CITY-ST-ZIP ☐ Change ☐ Add

TITLE ST ☐ Delete
NAME SMITH, EMILY B
STREET ADDRESS 2767 FOREST CIRCLE
CITY-ST-ZIP JACKSONVILLE FL 32257

TITLE ☐ Change ☐ Add
NAME ☐ Change ☐ Add
STREET ADDRESS ☐ Change ☐ Add
CITY-ST-ZIP ☐ Change ☐ Add

TITLE P ☐ Delete
NAME SMITH, HAWLEY V JR
STREET ADDRESS ONE SAN JOSE PLACE SUITE 7
CITY-ST-ZIP JACKSONVILLE FL 32207

TITLE ☐ Change ☐ Add
NAME ☐ Change ☐ Add
STREET ADDRESS ☐ Change ☐ Add
CITY-ST-ZIP ☐ Change ☐ Add

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Add
NAME ☐ Change ☐ Add
STREET ADDRESS ☐ Change ☐ Add
CITY-ST-ZIP ☐ Change ☐ Add

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Add
NAME ☐ Change ☐ Add
STREET ADDRESS ☐ Change ☐ Add
CITY-ST-ZIP ☐ Change ☐ Add

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Mary Louise Dungey*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4-26-06

Date

Daytime Phone #