

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

07 JAN 23 PM 12:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # M04000005567

1. Entity Name  
COASTAL CAR WASH, L.L.C.



Principal Place of Business  
16024 U.S. 431  
HEADLAND, AL 36345

Mailing Address  
16024 U.S. 431  
HEADLAND, AL 36345

DO NOT WRITE IN THIS SPACE



01082007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number  
72-1382258

Applied For  
Not Applicable

5. Certificate of Status Desired

☐ \$5.00 Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

RUSHING, HAROLD  
6609 THOMAS DR. UNIT 503  
PANAMA CITY BEACH, FL 32408

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IN THIS SPACE

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 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

Filing Fee is \$50.00  
Due by May 1, 2007

## 9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
RUSHING, HAROLD  
124 STONEGATE DR.  
HEADLAND, AL 36345

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
RUSHING, MARTY  
P.O. BOX 220  
HEADLAND, AL 36345

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #