

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000004414

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

FILED  
Mar 21, 2008  
Secretary of State

**Current Principal Place of Business:**

3162 PARLIAMENT CIR  
MONTGOMERY, AL 36116

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 241888  
MONTGOMERY, AL 361241888

**New Mailing Address:**

FEI Number: 20-3109526

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

AGENTS AND CORPORATIONS, INC.  
300 FIFTH AVENUE SOUTH  
SUITE 101-330  
NAPLES, FL 34102 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: MGR ( ) Delete  
Name: HAYES, KENNETH R  
Address: 316 LAUREL RIDGE  
City-St-Zip: ALEXANDER CITY, AL 35010

Title: MGR ( ) Delete  
Name: HAYES, BETH K  
Address: 316 LAUREL RIDGE  
City-St-Zip: ALEXANDER CITY, AL 35010

Title: MGR ( ) Delete  
Name: CHANCELLOR, DAVID B  
Address: 8464 ROCKBRIDGE CIR  
City-St-Zip: MONTGOMERY, AL 36116

Title: MGR ( ) Delete  
Name: GARRETT, MARCUS E  
Address: 219 PALOS VERDES DR  
City-St-Zip: TROY, AL 36079

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: MARCUS E GARRETT

MGR

03/21/2008

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