

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M97000000523

Entity Name: COASTAL MARITIME SERVICES, LLC

FILED
April 14, 2008
Secretary of State
VOID
Filed in Error

Current Principal Place of Business:

8693 MARITIME ST
JACKSONVILLE, FL 32226

New Principal Place of Business:

Current Mailing Address:

PO BOX 28639
JACKSONVILLE, FL 322268639

New Mailing Address:

FEI Number: 58-2293157

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINDEBACK, MAGNUS B
8693 MARITIME ST
JACKSONVILLE, FL 32226 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 () Delete
Name: LINDEBACK, MAGNUS B
Address: 8693 MARITIME ST
City-St-Zip: JACKSONVILLE, FL 32226

Title: MGR () Delete
Name: WILEY, KATHLEEN E
Address: 8693 MARITIME ST
City-St-Zip: JACKSONVILLE, FL 32226

ADDITIONS/CHANGES:

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: MAGNUS B LINDEBACK

CAPT

04/14/2008

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