2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DOCUMENT # M9700000671

COASTAL CREDIT, L.L.C.



FILED Jan 24, 2005 08:00 AM **Secretary of State**

Principal Place of Business

3852 VIRGINIA BEACH BLVD. VIRGINIA BEACH, VA 23452

Mailing Address

P.O. BOX 9410

VIRGINIA BEACH, VA 23450-9410



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01172005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 54-1859286

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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8.	. The above named entity submits this statement for the purpose of changing its registered office or registered agent,	or both, i	in the State of Florida.	I am familiar with,	and accept
	the obligations of registered agent.				

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

(NOTE Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2005

9.	9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ROSE, JOHN HERMITAGE SQUARE HERMITAGE, PA 16148		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR STOUT, MICHAEL 609 HAMSHIRE COURT CARMEL, IN		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MCKNIGHT, WILLIAM 3852 VIRGINIA BEACH BLVD. VIRGINIA BEACH, VA 23452		
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

WILLIAM E. MCKNIGHT 01/18/05 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE