## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000172813

Entity Name: COASTAL WILDLIFE TOURS LLC

**Current Principal Place of Business:** 

120 GARDENIA STREET PANAMA CITY BEACH. FL 32407

**Current Mailing Address:** 

120 GARDENIA STREET

PANAMA CITY BEACH, FL 32407

FEI Number: 46-4320211 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRASIER, LORRAINE N 120 GARDENIA STREET PANAMA CITY BEACH, FL 32407 US

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

FILED Jan 30, 2015

**Secretary of State** 

CC6274472740

## Authorized Person(s) Detail:

Title MGR

Name FRASIER, LORRAINE N
Address 120 GARDENIA STREET

City-State-Zip: PANAMA CITY BEACH FL 32407

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: LORRAINE FRASIER

CAPTAIN

01/30/2015

Date