

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Feb 13, 2006 08:00 AM
Secretary of State
BY: _____

DOCUMENT # L02000002256
1. Entity Name
GOLD COAST PROPERTIES, A FLORIDA LLC



Principal Place of Business
**4281 NW 1ST AVENUE
BOCA RATON FL 33431**

Mailing Address
**4281 NW 1ST AVENUE
BOCA RATON FL 33431**

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country



1st MOORE CR2E083 (10/05)

4. FEI Number **75-2997025** ☐ Applied For Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent
**STRAUS, STEVE
4281 NW 1ST AVENUE
BOCA RATON FL 33431**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2006

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM STRAUS, STEVE 4281 NW 1ST AVE. BOCA RATON FL 33431	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	000000432512 02/23/06-800/0-025 50.00	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 609, Florida Statutes.

SIGNATURE: *Steve Straus* 1/31/06 561-883-3110