

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000015838

FILED
Jan 10, 2006
Secretary of State

Entity Name: GULFSIDE LAND DEVELOPMENT, L.L.C.

Current Principal Place of Business:

6187 NW 167TH STREET H-25
MIAMI, FL 33015

New Principal Place of Business:

Current Mailing Address:

6187 NW 167TH STREET H-25
MIAMI, FL 33015

New Mailing Address:

FEI Number: 02-0626564

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PINNA, WILLIAM R
6187 NW 167TH STREET H-25
MIAMI, FL 33015 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: PINNA, WILLIAM
Address: 49 NE 158 ST.
City-St-Zip: MIAMI, FL 33162

Title: MGRM () Delete
Name: NEUMANN, BARRY
Address: 15 CORRINE PLACE
City-St-Zip: KEY LARGO, FL 33037

Title: MGR () Delete
Name: COSTELLO, KATHRYN
Address: 3286 N. SIDE PKWY BORGHESE #904
City-St-Zip: ATLANTA, GA 30327

Title: MGR () Delete
Name: BELDEN, SCOTT
Address: 4535 VASCO STREET
City-St-Zip: PUNTA GORDA, FL 33950

Title: MGRM () Delete
Name: BELDEN, SHERRI
Address: 4535 VASCO STREET
City-St-Zip: PUNTA GORDA, FL 33950

Title: MGRM () Delete
Name: PINNA, JOANN
Address: 49 NE 158 ST.
City-St-Zip: MIAMI, FL 33162

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
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City-St-Zip:

Title: () Change () Addition
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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 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: WILLIAM PINNA

MGRM

01/10/2006

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