## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000002194

Entity Name: GULF SHORES MARINA, L.L.C.

**Current Principal Place of Business:** 

3470 BAYSHORE DR. NAPLES. FL 34112-6362

**Current Mailing Address:** 

3470 BAYSHORE DR. NAPLES. FL 34112-6362

FEI Number: 59-3632962 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAIN, II, KENNETH AMR 3470 BAYSHORE DR NAPLES, FL 34112-6362 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: KENNETH A MAIN. II 03/09/2015

Electronic Signature of Registered Agent

Date

**FILED** Mar 09, 2015

**Secretary of State** 

CC1507657428

Authorized Person(s) Detail :

Title MGRM Title **MGRM** 

MAIN, KENNETH AII MAIN, STEPHEN C Name Name 3643 NORTH RD 15 NEWBURY PLACE Address Address City-State-Zip: NAPLES FL 34102 NAPLES FL 34104 City-State-Zip:

Title **MGRM** Title MGR

Name PRIOLI, LAURA MAIN MAIN, NANCY C Name Address 730 CLARENDON CT Address 1355 MARIPOSA CIRCLE 101 NAPLES FL 34109 City-State-Zip:

NAPLES FL 34105 City-State-Zip:

MGR

Title

Title MGR

Name TUW KENNETH A MAIN ESTATE Name MAIN, DAVID C

Address 1355 MARIPOSA CIRCLE Address 101

8940 SAN GABRIEL

City-State-Zip: NAPLES FL 34105 City-State-Zip: ATASCADERO CA 93422

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.

SIGNATURE: LAURA MAIN PRIOLI **MGRM** 

Electronic Signature of Signing Authorized Person(s) Detail

03/09/2015 Date