## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000022060

Entity Name: GULFSTREAM CENTER, LLC

**Current Principal Place of Business:** 

4509 BEE RIDGE ROAD

SUITE C

SARASOTA, FL 34233

**Current Mailing Address:** 

4509 BEE RIDGE ROAD SUITE C

SARASOTA, FL 34233 US

FEI Number: 20-4054948 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DRAKE, KEVIN J 1432 FIRST STREET SARASOTA, FL 34236 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: KEVIN J DRAKE 04/30/2014

Electronic Signature of Registered Agent

Date

**FILED** Apr 30, 2014

**Secretary of State** 

CC4455764150

Authorized Person(s) Detail:

Title **MGRM** Title **MGRM** 

DRIGGERS, KIMBERLY S GRANICZ, ROBERT Name Name Address 4509 BEE RIDGE ROAD Address 5098 SEAGRASS DRIVE

UNIT C

City-State-Zip: VENICE FL 34293 SARASOTA FL 34233 City-State-Zip:

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