

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2007 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # L00000000917 1. Entity Name NORIC GULF PLACE INVESTMENTS LLC |  |
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| Principal Place of Business 4300 LEGENDARY DRIVE SUITE 204 DESTIN, FL 32541 | Mailing Address 4300 LEGENDARY DRIVE SUITE 204 DESTIN, FL 32541 |
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01262007 No Chg-LLC CR2E083 (11/05)

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| 4. FEI Number 65-0975831 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent

OLSON, RICHARD
4300 LEGENDARY DRIVE
SUITE 204
DESTIN, FL 32541

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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00
 Due by May 1, 2007**

| 9. MANAGING MEMBERS/MANAGERS | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM OLSON, RICHARD 4300 LEGENDARY DRIVE STE 204 DESTIN, FL 32541 |
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 04/24/07-80130-019 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 Chapter 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 608, Florida Statutes.

SIGNATURE  4-6-07 850-650-2858
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #