

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000002194

FILED
Mar 31, 2005
Secretary of State

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

Current Principal Place of Business:

3470 BAYSHORE DR.
NAPLES, FL 34112

New Principal Place of Business:

Current Mailing Address:

3470 BAYSHORE DR.
NAPLES, FL 34112

New Mailing Address:

FEI Number: 59-3632962

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VOLPE, MICHAEL J ESQ.
711 FIFTH AVE, S
STE 201
NAPLES, FL 341026628 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/MEMBERS:

Title: MGRM () Delete
Name: MAIN, KENNETH A II
Address: 3643 NORTH RD
City-St-Zip: NAPLES, FL 34104

Title: MGRM () Delete
Name: MAIN, STEPHEN C
Address: 15 NEWBURY PLACE
City-St-Zip: NAPLES, FL 34102

Title: MGR () Delete
Name: MAIN, NANCY C
Address: 395 21ST AVE., S.
City-St-Zip: NAPLES, FL 34102

Title: MGRM () Delete
Name: PRIOLI, LAURA MAIN
Address: 730 CLARENDON CT
City-St-Zip: NAPLES, FL 34109

Title: MGR () Delete
Name: MAIN, DAVID C
Address: 8940 SAN GABRIEL
City-St-Zip: ATASCADERO, CA 93422

Title: MGR () Delete
Name: TUV KENNETH A MAIN E, STATE
Address: 395 21ST AVE., S.
City-St-Zip: NAPLES, FL 34102

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
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
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 Section 119.07(3)(i), 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: LAURA MAIN PRIOLI

MGR

03/31/2005

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