2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000003280

Entity Name: GULF COAST CONSTRUCTION LLC

FILED Apr 21, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

18529 SANDY COVE TRL 18277 FERN RD.

FORT MYERS, FL 33912 FORT MYERS, FL 33912

Current Mailing Address: New Mailing Address:

18529 SANDY COVE TRL 18277 FERN RD.

FORT MYERS, FL 33912 FORT MYERS, FL 33912

FEI Number: 65-6372179 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPIEGEL & UTRERA, PA

1840 CORAL WAY

18277 FERN RD.

4TH ELOOP

4TH FLOOR FORT MYERS, FL 33912 UMIAMI, FL 33145 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: COLLEEN MASTROIANNI 04/21/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

Title: P () Delete Title: MGR (X) Change () Addition

 Name:
 RICHARDS, DONALD A
 Name:
 RICHARDS, DONALD A

 Address:
 18529 SANDY COVE DR
 Address:
 9395 CROCUS CT,

 City-St-Zip:
 FT MYERS, FL 33912
 City-St-Zip:
 FT MYERS, FL 33912

 $\label{eq:second-continuous} \mbox{Title:} \qquad \mbox{S} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{MGR} \qquad \mbox{(X) Change () Addition}$

 Name:
 MASTROIANNI, JEFFREY
 Name:
 MASTROIANNI, JEFFREY

 Address:
 18277 FERN RD.
 Address:
 18277 FERN RD.

 City-St-Zip:
 FT MYERS, FL 33912
 City-St-Zip:
 FT MYERS, FL 33912

Title: T () Delete Title: MGR (X) Change () Addition

 Name:
 CHURA, MICHAEL
 Name:
 CHURA, MICHAEL

 Address:
 16717 BOBCAT DR
 Address:
 16717 BOBCAT DR

 City-St-Zip:
 FORT MYERS, FL 33908
 City-St-Zip:
 FORT MYERS, FL 33908

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: JEFF MASTROIANNI M 04/21/2005