

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 20, 2004 08:00 AM
Secretary of State

DOCUMENT # L01000009445

1. Entity Name

GULFSTREAM LAND COMPANY, LLC



Principal Place of Business

3210 ST. CHARLES PLACE
BOCA RATON, FL 33434

Mailing Address

3210 ST. CHARLES PLACE
BOCA RATON, FL 33434

DO NOT WRITE IN THIS SPACE



01112004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number

65-1127287

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

BIGGS, ARTHUR E
3210 ST. CHARLES PLACE
BOCA RATON, FL 33434

**DO NOT WRITE
IN THIS SPACE**

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, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME GREENWICH CAPITAL CORPORATION
STREET ADDRESS 3210 ST. CHARLES PLACE
CITY-ST-ZIP BOCA RATON, FL 33434

TITLE MGR
NAME BIGGS, ARTHUR E
STREET ADDRESS 3210 ST CHARLES PL
CITY-ST-ZIP BOCA RATON, FL 33434

TITLE MGR
NAME BIGGS, WILLIAM E
STREET ADDRESS 3210 ST CHARLES PL
CITY-ST-ZIP BOCA RATON, FL 33434

TITLE MGR
NAME BIGGS, CHARLOTTE E
STREET ADDRESS 3210 ST CHARLES PL
CITY-ST-ZIP BOCA RATON, FL 33434

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000008335
01/20/04-80058-016 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Arthur E Biggs
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

1/15/04 561-994-5862