2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 21, 2009
Secretary of State

DOCUMENT# L01000010161

Entity Name: GULFSTREAM DEVELOPMENT GROUP LLC

Current Principal Place of Business:

4037 DEL PRADO BLVD
CAPE CORAL, FL 33904

New Principal Place of Business:

114 DEL PRADO BLVD S
CAPE CORAL, FL 33990

Current Mailing Address:

4037 DEL PRADO BLVD
CAPE CORAL, FL 33904

New Mailing Address:

114 DEL PRADO BLVD S
CAPE CORAL, FL 33990

FEI Number: 65-1110365 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HAAG, BRIAN
4037 DEL PRADO BLVD
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

HAAG, BRIAN
114 DEL PRADO BLVD S
CAPE CORAL, FL 33990 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: _____ 01/21/2009
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: HAAG, BRIAN
Address: 4037 DEL PRADO
City-St-Zip: CAPE CORAL, FL 33904

Title: MGR ( ) Delete
Name: KELLY, DANIEL M
Address: 1800 MARINA CIR
City-St-Zip: NORTH FORT MYERS, FL 33903

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: HAAG, BRIAN
Address: 114 DEL PRADO S
City-St-Zip: CAPE CORAL, FL 33990

Title: MGR (X) Change ( ) Addition
Name: KELLY, DANIEL M
Address: 1949 SE 37TH ST
City-St-Zip: CAPE CORAL, FL 33904

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DANIEL M KELLY MGR 01/21/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date