## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L02000011759

City-St-Zip:

FILED May 03, 2004 Secretary of State

Entity Nan	ne: GULF CC	DAST BUILDERS, LLC				
Current Pi	rincipal Place	of Business:	New Princ	ipal Place of Business:		
4808 CORAL BLVD BRADENTON, FL 34210						
Current Mailing Address:			New Maili	New Mailing Address:		
PO BOX 15 HOLMES E	594 BEACH, FL 34	1218				
FEI Number:	38-2650369	FEI Number Applied For()	FEI Number Not Appli	licable ( ) Certificate of Status Desired ( )		
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
MONTI, NA 4808 CORA BRADENT		) US		Number Not Applicable ( )  Certificate of Status Desired ( )  Name and Address of New Registered Agent:  See of changing its registered office or registered agent, or both  Date  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		
The above in the State		submits this statement for the	purpose of changing it	ts registered office or registered agent, or bo		
SIGNATUR	RE:					
	Electror	ic Signature of Registered Ag	ent	Date		
MANAGIN	G MEMBERS	/MEMBERS:	ADDITION	IS/CHANGES:		
Title: Name: Address: City-St-Zip:	MGRM ( ) MONTI, RAYMO 4808 CORAL B BRADENTON, I	LVD	Name: Address:	()Change()Addition		
Title: Name: Address: City-St-Zip:	MGRM ( ) POWELL, CHR 4008 PLUMOS BRADENTON, I	E DR	Name: Address:	()Change()Addition		
Title: Name:		Delete	Title: Name:	MGRM ( ) Change (X) Addition ZIMMERMAN, JASON		

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.

City-St-Zip: HOLMES BEACH, FL 34217

SIGNATURE: RAYMOND MONTI **MGRM** 05/03/2004