

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000018931

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Entity Name:** GULF COAST INVESTMENT MANAGEMENT, LLC

**Current Principal Place of Business:**

23064 TREE CREST CT  
BONITA SPRINGS, FL 34135

**New Principal Place of Business:**

**Current Mailing Address:**

23064 TREE CREST CT  
BONITA SPRINGS, FL 34135

**New Mailing Address:**

**FEI Number:** 01-0736402

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

POST, ALLEN C  
23064 TREE CREST CT  
BONITA SPRINGS, FL 34135 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/MANAGERS:**

**Title:** MGRM  
**Name:** JOHNSON, A. KEITH  
**Address:** 16245 COCO HAMMOCK WAY #202  
**City-St-Zip:** FT. MYERS, FL 33908

**Title:** MGRM  
**Name:** POST, ALLEN C  
**Address:** 23064 TREE CREST CT  
**City-St-Zip:** BONITA SPRINGS, FL 34135

I hereby 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:** ALLEN C. POST

MGRM

04/19/2011

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