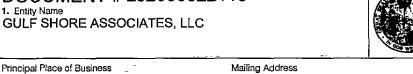
## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT **DOCUMENT # L02000022113** 1. Entity Name **GULF SHORE ASSOCIATES, LLC**

**FILED** Jan 14, 2005 08:00 AM Secretary of State



6067 17TH STREET, EAST

BRADENTON, FL 34203



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01062005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 56-2289377

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GOCINSKI, ROBERT 6067 17TH STREET, EAST BRADENTON, FL 34203

6067 17TH STREET, EAST

BRADENTON, FL 34203 \_\_\_

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<ol><li>The above named entity submits this statement for the purpose of chang the obligations of registered agent.</li></ol>	ging its register	ed office or registered agent,	or both, in the State of Florida.	I am familiar with, and accept
SIGNATURE	INOTE, Registere	d Agent signature required when reinsta	dna)	DATE

## Filing Fee is \$50.00 Due by May 1, 2005

1600000180479 01/14/05-80008-002 50.00

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GOCINSKI, ROBERT 6067 17TH ST EAST BRADENTON, FL 34203
RILE NAME STREET ADDRESS CITY-ST-ZIP	VP UNGARELLI, JOSEPH 6067 17TH ST EAST BRADENTON, FL 34203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T UNGARELLI, DOROTHY 6067 17TH ST EAST BRADENTON, FL 34203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GOCINSKI, DOLORES 6067 17TH ST EAST BRADENTON, FL 34203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS	

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11. I hereby certify that the information supplied with this filing does not qualify 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 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 prustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

CITY-ST-ZIP