2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000022113

Entity Name: GULF SHORE ASSOCIATES, LLC

FILED Feb 06, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6067 17TH STREET, EAST 7106 24TH COURT EAST BRADENTON, FL 34203 SARASOTA, FL 34243

Current Mailing Address: New Mailing Address:

6067 17TH STREET, EAST 7106 24TH COURT EAST 8ARASOTA, FL 34243

FEI Number: 56-2289377 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GOCINSKI, ROBERT
6067 17TH STREET, EAST
BRADENTON, FL 34203 US
GOCINSKI, ROBERT
7106 24TH COURT EAST
SARASOTA, FL 34243 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: ROBERT GOCINSKI 02/06/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

 Title:
 P
 () Delete

 Name:
 GOCINSKI, ROBERT

 Address:
 6067 17TH ST EAST

 City-St-Zip:
 BRADENTON, FL 34203

 Title:
 VP
 () Delete

 Name:
 UNGARELLI, JOSEPH

 Address:
 6067 17TH ST EAST

 City-St-Zip:
 BRADENTON, FL 34203

 Title:
 T
 () Delete

 Name:
 UNGARELLI, DOROTHY

 Address:
 6067 17TH ST EAST

 City-St-Zip:
 BRADENTON, FL 34203

 Title:
 S
 (X) Delete

 Name:
 GOCINSKI, DOLORES

 Address:
 6067 17TH ST EAST

 City-St-Zip:
 BRADENTON, FL 34203

ADDITIONS/CHANGES:

 $\begin{array}{lll} \mbox{Title:} & \mbox{P} & (\mbox{X}) \mbox{ Change () Addition} \\ \mbox{Name:} & \mbox{GOCINSKI, ROBERT} \end{array}$

Address: 7106 24TH COURT EAST City-St-Zip: SARASOTA, FL 34243

Title: VP (X) Change () Addition

Name: UNGARELLI, DOROTHY
Address: 7106 24TH COURT EAST
City-St-Zip: SARASOTA, FL 34243

Title: T (X) Change () Addition

Name: GOCINSKI, DOLORES
Address: 7106 24TH COURT EAST
City-St-Zip: SARASOTA, FL 34203

Title: () Change () Addition

Name: Address: City-St-Zip:

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: ROBERT GOCINSKI P 02/06/2008