LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 12, 2003 8:00 am
Secretary of State
03-12-2003 90011 047 ****50.00

DOCUMENT # L02000034725

1. Entity Name

GULFSTREAM EMPLOYEE INVESTMENTS, LLC (GEI)

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
14135 Collier Blvd.	14135 Collier Blvd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Naples, FL	City & State: Naples, FL 34119
Zip: 34119 Country: U.S.A.	Zip: 34119 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 02-0656274 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Michael J. Peel

Street Address (P.O. Box Number is Not Acceptable): c/o Gulfstream Employee Investments LLC

14135 Collier Blvd.

City: Naples FL Zip Code: 34119

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ Michael J. Peel 2/11/03
Signature, typed or printed name of registered agent and title if applicable. DATE

FEE IS $50.00
Make Check Payable to Florida Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
	Bonner G. Bacon Jr. - Acquisition mgr 1491 25th Street SW Naples, FL 34117
	Wayne D. Withers - organizational mgr 210 Vintage Circle #105 Naples, FL 34119
	Craig Bennett - Financial mgr. 14949 Indigo Lakes Drive Naples, FL 34119
	Gregory David - operations mgr. 1943 Timberline Dr. Naples, FL 34109
	Sherri Russell - marketing mgr 14494 Indigo Lakes Circle Naples, FL 34119
	Stacey Finch - secretary 1931 Rookery Bay Dr. #207 Naples, FL 34114

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CR2E083B (12/02)

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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Stacey Finch Stacey Finch 2/11/03 (239) 352-6318
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #