

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000000963

**FILED**  
**Mar 05, 2004**  
**Secretary of State**

**Entity Name:** GULFSTREAM BUILDING OF VERO, L.L.C.

**Current Principal Place of Business:**

1285 36TH STREET STE. 100  
VERO BEACH, FL 32960

**New Principal Place of Business:**

**Current Mailing Address:**

1285 36TH STREET STE. 100  
VERO BEACH, FL 32960

**New Mailing Address:**

**FEI Number:** 65-1168183      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

GARRIS, CHARLES E  
817 BEACHLAND BOULEVARD  
VERO BEACH, FL 32963      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/MEMBERS:**

Title:                      ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title:                      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title:                      MGRM      ( ) Change (X) Addition  
Name:                      GRIFFIN, DAVID W JR  
Address:                      1285 36TH STREET SUITE 100  
City-St-Zip:                      VERO BEACH, FL 32960

Title:                      MGRM      ( ) Change (X) Addition  
Name:                      STEINFELD, RICHARD MD  
Address:                      1285 36TH STREET SUITE 100  
City-St-Zip:                      VERO BEACH, FL 32960

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.

SIGNATURE: RICHARD STEINFELD MD

MGRM

03/05/2004

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