2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000023266

Entity Name: GULFERS DREAM HOMES L.L.C.

FILED Feb 11, 2004 Secretary of State

() Change () Addition

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

941 EAST GULF BEACH DRIVE ST. GEORGE ISLAND, FL 32328

Current Mailing Address: New Mailing Address:

941 EAST GULF BEACH DRIVE ST. GEORGE ISLAND, FL 32328

FEI Number: 20-0068043 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:

FOGLEMAN, GARY R FOGLEMAN, GARY R 3404 CLIFDÉND DRIVE 3404 CLIFDEN DRIVE TALLAHASSEE, FL 32309 US TALLAHASSEE, FL 32309 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: GARY R FOGLEMAN 02/11/2004

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

ADDITIONS/CHANGES:

MGRM () Delete FOGLEMAN, GARY R Name: Name: Address: 941 EAST GULF BEACH DRIVE Address: City-St-Zip: ST. GEORGE ISLAND, FL 32328 City-St-Zip:

Title: () Delete Title: MGRM () Change (X) Addition

Name: Name: FOGLEMAN, REBECCA G Address: Address: 3404 CLIFDEN DR City-St-Zip: City-St-Zip: TALLAHASSEE, FL 32309

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: GARYFOGLEMAN **MGRM** 02/11/2004