

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000027563

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Entity Name:** GULF COAST RESTORATION SERVICE, LLC

**Current Principal Place of Business:**

17061 ALICO COMMERCE CT  
UNIT #101  
FORT MYERS, FL 33967

**New Principal Place of Business:**

**Current Mailing Address:**

17061 ALICO COMMERCE CT  
UNIT #101  
FORT MYERS, FL 33967

**New Mailing Address:**

**FEI Number:** 41-2103493

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GORDON, ROBERT  
16113 PARQUE LANE  
NAPLES, FL 34110 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/MANAGERS:**

Title: MGRM  
Name: WHITE, KEVIN A MR.  
Address: 17061 ALICO COMMERCE CT #101  
City-St-Zip: FORT MYERS, FL 33967

Title: MGR  
Name: GORDON, MELINDA L MRS  
Address: 16113 PARQUE LANE  
City-St-Zip: NAPLES, FL 34110

I hereby 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: MELINDA GORDON

MGR

01/05/2010

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