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PICK-UP	WAIT	MAIL
(Bu	isiness Entity Name))
(Document Number)		
Certified Copies	Certificates o	of Status
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Special Instructions to Filing Officer:		



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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: THE GULF REALTY CO. LLC Name of Limited Liability Company			
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
HARRY PARKS Name of Person			
THE GULF REALTY CO. LLC Firm/Company			
867 5th AUE SOUTH			
WAPLES FL 34/02 City/State and Zip Code			
E-mail address: (to be used for (uture annual report notification)			
For further information concerning this matter, please call:			
HARRY DARKS at (239) 571-4/21 Name of Person Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following amount:			
\$25 Filing Fee & Certified Copy			

/ INHS18 (5/08)

\Box . STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

agoni, or boni, in the state of Frontial	A
1. Name of the limited liability company: THE GUL	FREALTY CO. ALC
2. (a) Principal office address of limited liability company	:
(Note: MUST BE STREET ADDRESS)	NAPLES, FLBY/22
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	SAME
3. Date of filing/registration in Florida	1. Document number
	>
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:
Registered Agent:	RICHARD K BENNETT
Registered Office Address:	NAPHES, FL 34/02
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	DEBORAH A. STEWART
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	400 FIFTH AVE SOUTH SUITE 200 NAPHES ,FL 34/02
If the limited liability company is not organized under the laconfirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company	orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization
HARRY PARKS	-
Printed or typed name of signee	great to got in this congoin. I fouther govern to
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pro and I am familiar with and accept the obligations of my pos Chapter 608, F.S. Or, if this document is being filed to men address, I hereby confirm that the limited liability company	gree to act in this capacity. I filtiner agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.

Ignature of Registered Agent