


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

F.L.L.C.
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 APR 15 AM 11:38

DOCUMENT # L03000033284 1. Entity Name GBP DEVELOPMENT, LLC	
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Principal Place of Business 8156 FIDDLER'S CREEK PARKWAY NAPLES, FL 34114	Mailing Address 8156 FIDDLER'S CREEK PARKWAY NAPLES, FL 34114
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DO NOT WRITE IN THIS SPACE



01172008 No Chg-LLC CR2E083 (12/07)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

WOODWARD, MARK J
 C/O WOODWARD, PIRES & LOMBARDO, P.A.
 3200 TAMiami TRAIL NORTH, STE. 200
 NAPLES, FL 33410

DO NOT WRITE
IN THIS SPACE

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GB PENINSULA, LTD 8156 FIDDLER'S CREEK PARKWAY NAPLES, FL 34114
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100123544021
04/15/08--01026--009 **138.75

100123544021
04/15/08--01026--013 **60.00

Walt

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Joseph Livio Parisi* 3/14/08 (239) 732-9400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

Joseph Livio Parisi, Authorized Representative