


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

**FILED
Jan 25, 2006 08:00 AM
Secretary of State**

DOCUMENT # L03000037664
1. Entity Name
GULF SOUTH DEVELOPMENT, LLC



Principal Place of Business 137 VERSAILLES CIRCLE NAPLES, FL 34112	Mailing Address P.O. BOX 1321 NAPLES, FL 34106
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DO NOT WRITE IN THIS SPACE



01202006No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-0347092	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
MASON, CARL F
137 VERSAILLES CIRCLE
NAPLES, FL 34112

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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)

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MASON, NINA B 137 VERSAILLES CIRCLE NAPLES, FL 34112
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02/02/06-80037-019 50.00

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 fiduciary empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date _____ Daytime Phone # _____