

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000041107

**FILED**  
**Apr 22, 2010**  
**Secretary of State**

**Entity Name:** THIEL-GUTENMANN DEVELOPERS, L.L.C.

**Current Principal Place of Business:**

1507 NORTH PALAFOX STREET  
PENSACOLA, FL 32501

**New Principal Place of Business:**

**Current Mailing Address:**

1591 VIA DE LUNA DR  
PENSACOLA BEACH, FL 32561

**New Mailing Address:**

P.O. BOX 1263  
GULF BREEZE, FL 32562

**FEI Number:** 56-2408283

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GUTENMAN, WILLIAM  
1507 NORTH PALAFOX STREET  
PENSACOLA, FL 32501 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: GUTENMANN, WILLIAM  
Address: 1507 NORTH PALAFOX STREET  
City-St-Zip: PENSACOLA, FL 32501

Title: MGRM  
Name: THIEL, MICHAEL J  
Address: PO BOX 1263  
City-St-Zip: GULF BREEZE, FL 32562

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: MICHAEL J. THIEL

MGRM

04/22/2010

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