# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Apr 14, 2009**
**Secretary of State**

DOCUMENT# L04000034993

**Entity Name:** GULF COAST CO-OP, LLC

**Current Principal Place of Business:**

1513 NORTH WASHINGTON BLVD.
SARASOTA, FL 34326

**New Principal Place of Business:**

**Current Mailing Address:**

1513 NORTH WASHINGTON BLVD.
SARASOTA, FL 34326

**New Mailing Address:**

**FEI Number: 20-1232536** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

THOMAS, JASON C
1513 N WASHINGTON BLVD
SARASOTA, FL 34236 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 ( ) Delete
Name: RADLUBE, INC.
Address: 5220 MANATEE AVE. W.
City-St-Zip: BRADENTON, FL 34209 US

Title: MGRM ( ) Delete
Name: FLORIDA'S LUBRICANTS, INC.
Address: 120 MARINER BLVD.
City-St-Zip: SPRING HILL, FL 34609 US

Title: MGRM ( ) Delete
Name: SOUTH BAY LUBE, INC.
Address: 1513 N. WASHINGTON BLVD.
City-St-Zip: SARASOTA, FL 34326 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change ( ) Addition
Name: ATLANTIC COAST ENTERPRISES, LLC.
Address: 12 HIGH STREET
City-St-Zip: NORWALK, CT 06851 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: JASON THOMAS RA 04/14/2009

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