## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000049377

PO BOX 505-O

HASTINGS, FL 32145

Address:

City-St-Zip:

Entity Name: GULFVIEW AT JENA, L.L.C.

FILED Mar 05, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 8 BARU RD ST AUGUSTINE, FL 32084 **Current Mailing Address: New Mailing Address:** 8 BARU RD ST AUGUSTINE, FL 32084 FEI Number: 20-1298739 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SHEPPARD, SEAN P ESQ ERIC, SNEDEKER SCOTT & SHEPPARD, P.A. 8 BAŔU ROAD ST AUGUSTINE, FL 32084 99 ORANGE ST US ST AUGUSTINE, FL 32084 US 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: ERIC SNEDEKER 03/05/2005 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES: MGR ( ) Delete Title: () Change () Addition SNEDEKER, ERIC Name: Name: 8 BARU RD Address: Address: City-St-Zip: ST AUGUSTINE, FL 32084 City-St-Zip: Title: MGR Title: ( ) Delete () Change () Addition SKARE, SCOTT Name: Name: Address: 520 ANCHOR POINT Address: City-St-Zip: DELRAY BEACH, FL 32086 City-St-Zip: Title: MGR () Delete Title: () Change () Addition AMERSON, SUE Name: Name: 5610 B DATIL PEPPER RD Address: Address: City-St-Zip: ST AUGUSTINE, FL 32086 City-St-Zip: Title: MGR ( ) Delete Title: () Change () Addition Name: FECHTER, SCOTT Name: 322 VAILEY BUNKER CT Address: Address: City-St-Zip: ST AUGUSTINE, FL 32080 City-St-Zip: Title: MGR ( ) Delete Title: () Change () Addition KINNARD, CHARLES R Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Address:

City-St-Zip:

SIGNATURE: ERIC SNEDEKER MGR 03/05/2005