

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000049377

**FILED**  
**Apr 12, 2011**  
**Secretary of State**

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

**Current Principal Place of Business:**

8 BARU RD  
ST AUGUSTINE, FL 32084

**New Principal Place of Business:**

164 LANTANA AVENUE  
FLAGLER BEACH, FL 32136

**Current Mailing Address:**

8 BARU RD  
ST AUGUSTINE, FL 32084

**New Mailing Address:**

164 LANTANA AVENUE  
FLAGLER BEACH, FL 32136

**FEI Number:** 20-1298739

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ERIC, SNEDEKER  
8 BARU ROAD  
ST AUGUSTINE, FL 32084 US

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

D. KEITH, SMITH  
164 LANTANA AVENUE  
FLAGLER BEACH, FL 32136 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: D. KEITH SMITH

04/12/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: KINNARD, CHARLES  
Address: 5956 HIGHWAY 358  
City-St-Zip: STEIN HATCHEE, FL 32359

Title: MRGM  
Name: LEMONS TO LEMONADE, LLC  
Address: 164 LANTANA AVENUE  
City-St-Zip: FLAGLER BEACH, FL 32136

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: CHARLES KINNARD

MGR

04/12/2011

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