

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000066439

FILED
Feb 15, 2006
Secretary of State

Entity Name: GULFPOINT PROPERTIES, LLC

Current Principal Place of Business:

375 FALLS POINT TRAIL
ALPHARETTA, GA 30022 US

New Principal Place of Business:

Current Mailing Address:

375 FALLS POINT TRAIL
ALPHARETTA, GA 30022 US

New Mailing Address:

FEI Number: 20-1592390

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NELSON, DOUGLAS M
4001 HILLCREST DRIVE
NO. 1002
HOLLYWOOD, FL 33021 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: MGR () Delete
Name: NELSON, DOUGLAS M
Address: 375 FALLS POINT TRAIL
City-St-Zip: ALPHARETTA, GA 30022 US

Title: MGR (X) Delete
Name: GOULD, DAVID
Address: 5225 COURAGEOUS WAKE
City-St-Zip: ALPHARETTA, GA 30022 US

ADDITIONS/CHANGES:

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: DOUGLAS NELSON

MGR

02/15/2006

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