

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000070015

FILED  
Apr 27, 2006  
Secretary of State

Entity Name: PRIME GULF ENTERPRISES LLC

**Current Principal Place of Business:**

833 W. TRENTON AVE.  
SUITE #4  
MORRISVILLE, PA 19067

**New Principal Place of Business:**

**Current Mailing Address:**

833 W. TRENTON AVE.  
SUITE #4  
MORRISVILLE, PA 19067

**New Mailing Address:**

FEI Number: 20-1663563      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CORPDIRECT AGENTS INC.  
515 E. PARK AVE.  
TALLAHASSEE, FL 32301      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: SCHAUTZ, JOHN L  
Address: 126 PONDEROSA DRIVE  
City-St-Zip: HOLLAND, PA 18966

Title: MGRM ( ) Delete  
Name: DREYER, EDWARD F  
Address: 437 GOLDEN GATE DRIVE  
City-St-Zip: RICHBORO, PA 18954

Title: MGRM ( ) Delete  
Name: DAVIS, WAYNE A  
Address: 2319 E. VINE STREET  
City-St-Zip: HATFIELD, PA 19440

Title: MGRM ( ) Delete  
Name: MCCABE, PAUL  
Address: 519 HAWTHORNE PLACE  
City-St-Zip: BERWYN, PA 19312

**ADDITIONS/CHANGES:**

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

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

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: JOHN SCHAUTZ

MGRM

04/27/2006

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