

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000013532

FILED
Jun 05, 2009
Secretary of State

Entity Name: GULF COAST CONDOMINIUM PARTNERS, LLC

Current Principal Place of Business:

2950 S.W. 27TH AVENUE STE. 300
MIAMI, FL 33133

New Principal Place of Business:

C/O PAUL KUNZ
444 BRICKELL AVENUE, SUITE 300
MIAMI, FL 33131

Current Mailing Address:

425 E. 86TH ST
APT. #7F
NEW YORK, NY 10028

New Mailing Address:

1223 WILSHIRE BLVD
NO. 1020
SANTA MONICA, CA 90403

FEI Number: 20-2332327 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BALOYRA, JOSE ESQ
2950 S.W. 27TH AVENUE STE. 300
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

KUNZ, PAUL ESQ
444 BRICKELL AVENUE
SUITE 300
MIAMI, FL 33131 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: PAUL KUNZ

06/05/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CHERNIS, MICHAEL
Address: 425 EAST 86TH STREET
City-St-Zip: NEW YORK, NY 10028

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CHERNIS, MICHAEL
Address: 1223 WILSHIRE BLVD, NO. 1020
City-St-Zip: SANTA MONICA, CA 90403

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: MICHAEL CHERNIS

MGR

06/05/2009

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