

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000016746

FILED  
Apr 27, 2006  
Secretary of State

Entity Name: GULFCOAST REAL ESTATE FUND MANAGERS, LLC

## Current Principal Place of Business:

5150 NORTH TAMIAMI TRAIL  
SUITE 402  
NAPLES, FL 34103

## New Principal Place of Business:

1045 CROSSPOINTE DRIVE  
SUITE 1  
NAPLES, FL 34110

## Current Mailing Address:

5150 NORTH TAMIAMI TRAIL  
SUITE 402  
NAPLES, FL 34103

## New Mailing Address:

1045 CROSSPOINTE DRIVE  
SUITE 1  
NAPLES, FL 34110

FEI Number: 35-2253161

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GALBRAITH, BRAD A  
5150 NORTH TAMIAMI TRAIL  
SUITE 402  
NAPLES, FL 34103 US

## Name and Address of New Registered Agent:

GALBRAITH, BRAD A  
1045 CROSSPOINTE DRIVE  
SUITE 1  
NAPLES, FL 34110 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:

04/27/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: GALBRAITH, BRAD A  
Address: 456 TERRACINA WAY  
City-St-Zip: NAPLES, FL 34119

Title: MGRM ( ) Delete  
Name: MAY, DOUGLAS E  
Address: 790 REGENCY RESERVE CIRCLE, #1301  
City-St-Zip: NAPLES, FL 34119

Title: MGRM ( ) Delete  
Name: GERARD, MONTE M  
Address: 2133 MISSION DRIVE  
City-St-Zip: NAPLES, FL 34109

## 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:

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: KYE J. STEFFEY

ATTY

04/27/2006

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