


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 14, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L05000039208</b> 1. Entity Name 21ST CENTURY GDA CLOAR BEACHES, LLC	
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Principal Place of Business 120 E. GRANADA BOULEVARD ORMOND BEACH, FL 32176-6630 US	Mailing Address POST OFFICE BOX 2652 ORMOND BEACH, FL 32176-2652
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**DO NOT WRITE IN THIS SPACE**



05102007No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-2791088	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent

KENNEDY, MICHAEL  
444 SEABREEZE BOULEVARD  
SUITE 10001  
DAYTONA BEACH, FL 32118

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

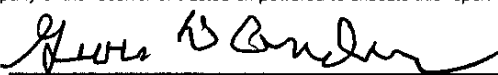
**Filing Fee is \$50.00  
Due by September 14, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TJ CLOAR, TRUSTEE OF THE TJ CLOAR TRUST 444 SEABREEZE BOULEVARD, SUITE 1001 DAYTONA BEACH, FL 32118
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GDA INVESTMENTS, LTD, A FLORIDA LIMITED 444 SEABREEZE BOULEVARD, SUITE 1001 DAYTONA BEACH, FL 32118
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM 21ST CENTURY INVESTMENTS FUND, NO.1, LLC 444 SEABREEZE BOULEVARD, SUITE 1001 DAYTONA BEACH, FL 32118
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000764088  
05/30/07-80041-020 50.00

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:**  **5-10-07**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #