2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000059881



FILED Apr 17, 2006 8:00 am Secretary of State

1. Entity Name GULF RESIDENTIAL PARTNERS II, LLC							04-17-2006 90055 008 ****50.00									
Principal Place of Business 3910 GOLF PARK LOOP, SUITE 1 BRADENTON, FL 34203			Mailing Address 3910 GOLF PARK LOOP, SUITE 1 BRADENTON, FL 34203					ti Bathi Sibi Gzija	2581 2 2 81 21	KIPS BYNIÐ LÍMÐI L	8181 # 818 2	PRI: (III 1881				
2. Principal Place of Business			3. Mailing Address													
Suite, Apt. #, etc.			Suite, Apt. #, etc.				04112006	Chg-LLC		CR2E083	(11/05)					
City & State		City & State			4. FEI Numb 20 - 4	1285	738	3		plied For t Applicable						
Ζiρ		Country	Zip	Coun	try			e of Status Des		□ Fe	5.00 Add e Required					
	6. Name	and Address of Current R	legistered Agent		ļ		7. Name an	d Address of	New Reg	istered Ag	ent					
WALLACK, MICHAEL M ESQ. 1819 MAIN STREET, SUITE 1100 SARASOTA, FL 34236					Street Ad 3910 Siret Ad 3910 Siret Ad	2 C	re/ P.O. Bax Numb Pe/	mi peris Not Acco Park	eptable)	ri'g op FL	Zip Code					
8. The above the obligati	ions of regist	y submits this statement for lengt agent or printed name of registrific agent ar	JE Sa	mu	ed office or i	register	ed agent, or b		_ /:	le. I am fan かんかん かんか DATE	nlliar with,	and accept				
Filing Fee is \$50.00 Due by May 1, 2006											Make check payable to Florida Department of State					
FI Di	iling Fee i ue by Ma	ls \$50.00 y 1, 2006						,)				
Fi Di	iling Fee i ue by Ma	Is \$50.00 y 1, 2006 MANAGING MEMBER	IS/MANAGERS	10.		· · · · · · · · · · · · · · · · · · ·				epartmen						
Di	lling Fee i	y 1, 2006	IS/MANAGERS	NAM STRE	E E EFT ADDRESS -ST-ZIP	MG Sa 391	RM Emuel	ADDI	TIONS/CI	HANGES	t of State	M Addition				
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	lling Fee i	y 1, 2006	 	TITLE NAM STRE CITY TITLE	E ET ADDRESS -ST-ZIP	MG Sa 391 Br	RM Emuel 10 Boi	ADDI	TIONS/CI	HANGES	t of State	M Addition				
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Thereby certify that the information supplied with this filling 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.

Samuel M. Coniglio, III 4/13/06

941-351-2664