Aug 08 06 11:00a Michael Trem

FILED
Aug 11, 2006 8:00 am
Secretary of State
05-08-2006 90036 043 ****50.00

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000064750

1. Entity Name
GULF BLVD PARTNERS-ONE LLC

Principal Place of Business	Mailing Address
7606 W. SAND LAKE ROAD ORLANDO, FL 32819 US	7606 W. SAND LAKE ROAD ORLANDO, FL 32819 US

03132006 Chg-LLC CR2E083 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	7065 Westpointe Drive Suite 303
City & State	Orlando FL
Zip / Country	32802 / USA

4. FEI Number 20-3135632 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FLEETING, ROBERT 7606 W. SAND LAKE ROAD ORLANDO, FL 32819	Name Street Address (P.O. Box Number is Not Acceptable) 7065 Westpointe Drive Suite 303 City Orlando FL Zip Code 32802

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 R Robert Fleeting 6/27/06
Signature, typed or printed name of registered agent and title if applicable. (MUST BE Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2006

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM FLEETING, ROBERT 7606 W. SAND LAKE ROAD ORLANDO, FL 32819 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 7065 Westpointe Drive #303 Orlando FL 32802
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM CHADWICK, HARRY R 7606 W. SAND LAKE ROAD ORLANDO, FL 32819 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 7065 Westpointe Drive #303 Orlando FL 32802
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM HANSEN, THOMAS O 7606 W. SAND LAKE ROAD ORLANDO, FL 32819 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 7065 Westpointe Drive #303 Orlando FL 32802
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☑ Addition MGRM Michael K. Gustin 9000 Roger Blvd #105 St Pete FL 33702
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: Michael K Gustin 4-26-06
MANDATORY: TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #