

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000065865

FILED
Apr 15, 2009
Secretary of State

Entity Name: GULF BREEZE MARINA, LLC

Current Principal Place of Business:

114 NE FIRST STREET
TRENTON, FL 32693 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 308
TRENTON, FL 32693 US

New Mailing Address:

FEI Number: 20-3092401

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURT, THEODORE M ESQ
114 NE FIRST STREET
TRENTON, FL 32693 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SHORE, FREDRIC R
Address: 13410 NW 49TH LANE
City-St-Zip: GAINESVILLE, FL 32606 US

Title: MGR () Delete
Name: BURT, THEODORE M
Address: 114 NE FIRST STREET, PO BOX 308
City-St-Zip: TRENTON, FL 32693 US

Title: MGR () Delete
Name: ELLISON, MATTHEW
Address: 322 2ND AVENUE NW, PO BOX 213
City-St-Zip: STEINHATCHEE, FL 32359 US

Title: MGR () Delete
Name: ELLISON, JENNIFER
Address: 322 2ND AVENUE NW, PO BOX 213
City-St-Zip: STEINHATCHEE, FL 32359 US

Title: MGR () Delete
Name: JONES, JERRY
Address: 534 SE 71ST AVENUE, PO BOX 942
City-St-Zip: CROSS CITY, FL 32628 US

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:

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 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: FREDRIC R. SHORE

MGRM

04/15/2009

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