

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000071936

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** GULF BREEZE APARTMENTS PARTNERS, LLC

**Current Principal Place of Business:**

340 GULF BREEZE AVENUE  
PUNTA GORDA, FL 33950 US

**New Principal Place of Business:**

**Current Mailing Address:**

340 GULF BREEZE AVENUE  
PUNTA GORDA, FL 33950 US

**New Mailing Address:**

FEI Number: 20-2207132

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SAXON, BERNICE S  
201 EAST KENNEDY BOULEVARD  
SUITE 600  
TAMPA, FL 33602 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  
Name: PUNTA GORDA HOUSING AUTHORITY  
Address: 340 GULF BREEZE AVENUE  
City-St-Zip: PUNTA GORDA, FL 33950 US

I hereby 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: LORAIN HELBER

E.D.

01/05/2011

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