2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000082416

Entity Name: GAINESVILLE PARTNERS, LLC

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Jurrent Principal Place of Business:	New Principal Place of Business:

4134 GULF OF MEXICO DRIVE 1626 RINGING BLVD SUITE 301 SUITE 500

LONGBOAT KEY, FL 34228 SARASOTA, FL 34236

Current Mailing Address: New Mailing Address:

P.O. BOX 8925
LONGBOAT KEY, FL 34228
SUITE 500
SARASOTA, FL 34236

FEI Number: 20-3334998 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ROSENBERG, DAVID H ESQ 8130 LAKEWOOD MAIN STREET 1626 RINGLING BLVD SUITE 208 SUITE 500 BRADENTON, FL 34202 US SARASOTA, FL 34236 US

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: 04/29/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 STARR, ROBIN
 Name:

 Address:
 P.O. BOX 8925
 Address:

 City-St-Zip:
 LONGBOAT KEY, FL 34228
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 STARR, CHARLES L III
 Name:

 Address:
 P.O. BOX 8925
 Address:

 City-St-Zip:
 LONGBOAT KEY, FL 34228
 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: CHARLES STARR MGRM 04/29/2009