

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000082416

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** GAINESVILLE PARTNERS, LLC

**Current Principal Place of Business:**

1626 RINGING BLVD  
SUITE 500  
SARASOTA, FL 34236

**New Principal Place of Business:**

**Current Mailing Address:**

1626 RINGING BLVD  
SUITE 500  
SARASOTA, FL 34236

**New Mailing Address:**

**FEI Number:** 20-3334998

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROSENBERG, DAVID H ESQ  
1626 RINGLING BLVD  
SUITE 500  
SARASOTA, FL 34236 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:** STARR, ROBIN  
**Address:** P.O. BOX 8925  
**City-St-Zip:** LONGBOAT KEY, FL 34228

**Title:** MGRM  
**Name:** STARR, CHARLES L III  
**Address:** P.O. BOX 8925  
**City-St-Zip:** LONGBOAT KEY, FL 34228

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:** ROBIN STARR

MGRM

02/16/2011

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