

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000089012

FILED
May 05, 2009
Secretary of State

Entity Name: GULF COAST ASSET MANAGEMENT, LLC

Current Principal Place of Business:

4352 BAYOU RIDGE DRIVE
PACE, FL 32571

New Principal Place of Business:

Current Mailing Address:

C/O DEBRA WALKER
4352 BAYOU RIDGE DR.
PACE, FL 32571

New Mailing Address:

FEI Number: 20-3366097 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WALKER, DEBRA L
4352 BAYOU RIDGE DRIVE
PACE, FL 32571 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RICHARDS, SHEILA N
Address: 4774 HICKORY SHORES BLVD.
City-St-Zip: GULF BREEZE, FL

Title: MGR () Delete
Name: WALKER, DEBRA L
Address: 4352 BAYOU RIDGE DRIVE
City-St-Zip: PACE, FL 32571

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HALE, SHEILA N
Address: 31620 ASHLEY CIRCLE
City-St-Zip: SPANISH FORT, AL 36527

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: DEBRA L. WALKER

MRS

05/05/2009

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