

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000107693

**FILED**  
**Mar 29, 2010**  
**Secretary of State**

**Entity Name:** GOULD ROAD ESTATES LLC

**Current Principal Place of Business:**

701 S.W 27 AVE.  
FORT LAUDERDALE, FL 33312

**New Principal Place of Business:**

4850 SW 58 AVE  
DAVIE, FL 33314

**Current Mailing Address:**

4840 SW 58 AVE  
DAVIE, FL 33314

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

ALMAS, KAHN  
4840 SW 58TH AVE  
DAVIE, FL 33314    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: KHAN, ALMAS  
Address: 4840 SW 58 AV  
City-St-Zip: DAVIE, FL 33314 BR

Title: MEMB  
Name: THOMAS PADAVATHIL  
Address: 11801 S.W 44STREET  
City-St-Zip: DAVIE, FL 33330 BR

Title: MEMB  
Name: JACOB PADAVATHIL  
Address: 5200 LANCELOT LANE  
City-St-Zip: DAVIE, FL 33331 BR

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: ALMAS KAHN

MGRM

03/29/2010

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