

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000000340

**FILED**  
**Apr 20, 2007**  
**Secretary of State**

**Entity Name:** GULFCOAST LAND DEVELOPMENT, LLC

**Current Principal Place of Business:**

5701 FT. DENAUD ROAD  
ALVA, FL 33920

**New Principal Place of Business:**

5701 FT. DENAUD ROAD  
LABELLE, FL 33920

**Current Mailing Address:**

P.O. BOX 2357  
LABELLE, FL 33975

**New Mailing Address:**

**FEI Number:** 20-4041549

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PAUL, BRYAN W  
5701 FT. DENAUD ROAD  
ALVA, FL 33920 US

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

PAUL, BRYAN W  
5701 FT. DENAUD ROAD  
LABELLE, FL 33935 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: \_\_\_\_\_

04/20/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: P ( ) Change (X) Addition  
Name: PAUL, BRYAN W  
Address: 5701 FT. DENAUD RD.  
City-St-Zip: LABELLE, FL 33935

I hereby certify that the information supplied with this filing does not qualify for the 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: BRYAN W PAUL

P

04/20/2007

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