

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000049127

Entity Name: GULFVIEW BAMBOO, LLC

FILED
Jan 05, 2007
Secretary of State

Current Principal Place of Business:

818 13TH STREET WEST
BRADENTON, FL 34205

New Principal Place of Business:

Current Mailing Address:

818 13TH STREET WEST
BRADENTON, FL 34205

New Mailing Address:

FEI Number: 20-4854911

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WICKMAN & WYCKOFF, P.A.
4909 MANATEE AVENUE WEST
BRADENTON, FL 34209 US

Name and Address of New Registered Agent:

WICKMAN LAW GROUP, P.L.
9080 58TH DRIVE EAST
SUITE 200
BRADENTON, FL 34202 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: JOHN WICKMAN

01/05/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WEICHEL-FULLER, SARA ANNE
Address: 818 13TH STREET WEST
City-St-Zip: BRADENTON, FL 34205

Title: MGR () Delete
Name: FULLER, MICHAEL J
Address: 818 13TH STREET WEST
City-St-Zip: BRADENTON, FL 34205

Title: MGR () Delete
Name: POLIVCHAK, JEFFERY D
Address: 4504 SWORDFISH
City-St-Zip: BRADENTON, FL 34208

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHAEL J FULLER

MGR

01/05/2007

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