

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000055223

FILED  
Mar 31, 2009  
Secretary of State

Entity Name: GHERLS CLUB L.L.C.

**Current Principal Place of Business:**

224 6TH AVENUE N.E.  
ST. PETE, FL 33701

**New Principal Place of Business:**

**Current Mailing Address:**

224 6TH AVENUE N.E.  
ST. PETE, FL 33701

**New Mailing Address:**

FEI Number: 51-0587012

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MABREY, SUSAN  
224 6TH AVENUE N.E.  
ST. PETE, FL 33701 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: MGR ( ) Delete  
Name: JONES, HAZEL  
Address: 12200 1ST STREET WEST #503  
City-St-Zip: TREASURE ISLAND, FL 33706

Title: MGRM ( ) Delete  
Name: SAVITSKY, GEORGINE  
Address: 2217 PASADENA PLACE  
City-St-Zip: GULFPORT, FL 33707

Title: MGRM ( ) Delete  
Name: MCMULLAN, PAUL  
Address: 16123 6TH STREET E.  
City-St-Zip: REDDINGTON BEACH, FL 33708

Title: MGRM ( ) Delete  
Name: MARTIN, LENA  
Address: 17400 GULF BLVD.  
City-St-Zip: N. REDINGTON BEACH, FL 33708

Title: MGRM ( ) Delete  
Name: DOBBIN, ELAINE  
Address: 15718 GULF BLVD.  
City-St-Zip: REDINGTON BEACH, FL 33708

Title: MGR ( ) Delete  
Name: MABREY, SUSAN  
Address: 224 6TH AVENUE N.E.  
City-St-Zip: ST. PETE, FL 33701

**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:

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 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: SUSAN MABREY

MGR

03/31/2009

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