

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000091109

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** GULFSTATES DEVELOPMENT, LLC

**Current Principal Place of Business:**

40 SOUTH PALAFOX PLACE,  
SUITE 500  
PENSACOLA, FL 32502

**New Principal Place of Business:**

401 E. CHASE ST  
SUITE 104  
PENSACOLA, FL 32502

**Current Mailing Address:**

PO BOX 940  
GULF BREEZE, FL 32562

**New Mailing Address:**

**FEI Number:** 20-2247247

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LIBERIS, CHARLES S  
40 SOUTH PALAFOX PLACE, SUITE 500  
PENSACOLA, FL 32502 US

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

LIBERIS, CHARLES S  
212 W. INTENDENCIA ST  
PENSACOLA, FL 32502 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:

04/30/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LIBERIS, CHARLES S  
Address: 212 W. INTENDENCIA ST  
City-St-Zip: PENSACOLA, FL 32502

Title: MGRM  
Name: BRANNEN, DAVID A  
Address: PO BOX 940  
City-St-Zip: GULF BREEZE, FL 32562

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: DAVID A BRANNEN

MG

04/30/2012

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