

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000105520

**Entity Name:** GULF VIEW SLIDERS, LLC

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

327 SUITE # 2 CEDAR AVE  
NICEVILLE, FL 32578

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 70  
NICEVILLE, FL 32588

**New Mailing Address:**

**FEI Number:** 20-5842089

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HAUGHT, BRUCE A  
385 HIGHWAY 98  
220  
DESTIN, FL 32541 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: ELLISON, ROBERT L  
Address: 266 HONEYSUCKLE WAY  
City-St-Zip: NICEVILLE, FL 32578

Title: MGRM  
Name: ELLISON, COREY L  
Address: 266 HONEYSUCKLE WAY  
City-St-Zip: NICEVILLE, FL 32578

Title: MGRM  
Name: DODDS, CORTNEY D  
Address: 542 GARDEN OAKS COVE  
City-St-Zip: NICEVILLE, FL 32578

Title: MGRM  
Name: PRICE, RAY E  
Address: 4592 DURBIN LANE  
City-St-Zip: HOLT, FL 32564

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: ROBERT ELLISON

MGRM

01/05/2012

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