

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000035193

Entity Name: GATORLAND ACURA, LLC

FILED
Mar 13, 2009
Secretary of State

Current Principal Place of Business:

2985 NORTH MAIN STREET
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

2985 NORTH MAIN STREET
GAINESVILLE, FL 32609

New Mailing Address:

FEI Number: 45-0557472

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROHLMAN, ADAM
3345 NORTH MAIN STREET
GAINESVILLE, FL 32609 US

Name and Address of New Registered Agent:

BISPLINGHOFF, BOB
3345 NORTH MAIN STREET
GAINESVILLE, FL 32609 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: BOB BISPLINGHOFF

03/13/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GETTEL, JAMES C
Address: 6423 14TH STREET WEST
City-St-Zip: BRADENTON, FL 34207

Title: M (X) Delete
Name: ROHLMAN, ADAM
Address: 2985 NORTH MAIN STREET
City-St-Zip: GAINESVILLE, FL 32609

Title: SEC () Delete
Name: BISPLINGHOFF, ROBERT E
Address: 3480 BEE RIDGE ROAD
City-St-Zip: SARASOTA, FL 34239

Title: TREA () Delete
Name: BISPLINGHOFF, ROBERT E
Address: 3480 BEE RIDGE ROAD
City-St-Zip: SARASOTA, FL 34239

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:

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: BOB BISPLINGHOFF

COO

03/13/2009

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