

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000098819

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Entity Name:** UNIT 317 GULF DUNES, LLC

**Current Principal Place of Business:**

515 N. FLAGLER DRIVE, SUITE P-400  
WEST PALM BEACH, FL 33041

**New Principal Place of Business:**

**Current Mailing Address:**

515 N. FLAGLER DRIVE, SUITE P-400  
WEST PALM BEACH, FL 33041

**New Mailing Address:**

**FEI Number:** 26-1156432

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TAYLOR, TERRY  
515 N. FLAGLER DRIVE, SUITE P-400  
WEST PALM BEACH, FL 33041 US

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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: SYLVIA QUEPPET

04/30/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: S  
Name: CERA, NANCY  
Address: 515 N FLAGLER DR., SUITE P-400  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: AS  
Name: HOLLAND, MARYANN  
Address: 515 N FLAGLER DRIVE, SUITE P400  
City-St-Zip: WEST PALM BEACH, FL 33401

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: NANCY CERA

S

04/30/2010

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