

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000107182

FILED
Apr 02, 2009
Secretary of State

Entity Name: GATORS DOCKSIDE HIGHLAND CITY LLC

Current Principal Place of Business:

1331 SOUTH INTERNATIONAL PARKWAY, STE 1291
LAKE MARY, FL 32746 US

New Principal Place of Business:

1331 S. INTERNATIONAL PARKWAY
SUITE 1291
LAKE MARY, FL 32746 US

Current Mailing Address:

1331 SOUTH INTERNATIONAL PARKWAY, STE 1291
LAKE MARY, FL 32746 US

New Mailing Address:

1331 S. INTERNATIONAL PARKWAY
SUITE 1291
LAKE MARY, FL 32746 US

FEI Number: 41-2255704

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CIPPARONE, PAUL
1331 SOUTH INTERNATIONAL PARKWAY, STE 1291
LAKE MARY, FL 32746 US

Name and Address of New Registered Agent:

CIPPARONE, PAUL
1331 S. INTERNATIONAL PARKWAY
SUITE 1291
LAKE MARY, FL 32746 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:

04/02/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CIBRO MANAGEMENT,
Address: 1331 SOUTH INTERNATIONAL PARKWAY, STE 1291
City-St-Zip: LAKE MARY, FL 32746 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CIBRO MANAGEMENT,
Address: 1331 SOUTH INTERNATIONAL PARKY. # 1291
City-St-Zip: LAKE MARY, FL 32746 US

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: PAUL CIPPARONE

MGRM

04/02/2009

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