

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000119691

Entity Name: 2740 GULF BLVD, LLC

FILED
Apr 08, 2009
Secretary of State

Current Principal Place of Business:

507 BEACON SOUND WAY
APOLLO BEACH, FL 33572

New Principal Place of Business:

619 BALIBAY ROAD
APOLLO BEACH, FL 33572

Current Mailing Address:

507 BEACON SOUND WAY
APOLLO BEACH, FL 33572

New Mailing Address:

619 BALIBAY ROAD
APOLLO BEACH, FL 33572

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOYLE, PERLIE H JR.
507 BEACON SOUND WAY
APOLLO BEACH, FL 33572 US

Name and Address of New Registered Agent:

DOYLE, PERLIE H JR.
619 BALIBAY ROAD
APOLLO BEACH, FL 33572 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:

04/08/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DOYLE, PERLIE H JR.
Address: 507 BEACON SOUND WAY
City-St-Zip: APOLLO BEACH, FL 33572

Title: MGRM () Delete
Name: DOYLE, DEBORAH T
Address: 507 BEACON SOUND WAY
City-St-Zip: APOLLO BEACH, FL 33572

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DOYLE, PERLIE H JR.
Address: 619 BALIBAY ROAD
City-St-Zip: APOLLO BEACH, FL 33572

Title: MGRM (X) Change () Addition
Name: DOYLE, DEBORAH T
Address: 619 BALIBAY ROAD
City-St-Zip: APOLLO BEACH, FL 33572

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: PERLIE H. DOYLE, JR.

MGRM

04/08/2009

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