

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000017085

FILED  
Apr 27, 2009  
Secretary of State

**Entity Name:** GULF COAST ACCOUNTING SERVICES, LLC

**Current Principal Place of Business:**

1514 NORTH 9TH AVENUE  
PENSACOLA, FL 32503

**New Principal Place of Business:**

2735 GULF BREEZE PARKWAY  
GULF BREEZE, FL 32563

**Current Mailing Address:**

1514 NORTH 9TH AVENUE  
PENSACOLA, FL 32503

**New Mailing Address:**

2735 GULF BREEZE PARKWAY  
GULF BREEZE, FL 32563

**FEI Number:** 26-1949172

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

POLK, PHILLIP A  
1514 NORTH 9TH AVENUE  
PENSACOLA, FL 32503 US

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

POLK, PHILLIP A  
1517 WOODLAWN WAY  
GULF BREEZE, FL 32563 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:**

04/27/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: POLK, PHILLIP A  
Address: 1514 NORTH 9TH AVENUE  
City-St-Zip: PENSACOLA, FL 32503

Title: MGRM ( ) Delete  
Name: MILLER, CARLA R  
Address: 6305 FOREST DR.  
City-St-Zip: MILTON, FL 32570

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: POLK, PHILLIP A  
Address: 1517 WOODLAWN WAY  
City-St-Zip: GULF BREEZE, FL 32563

Title: MGRM (X) Change ( ) Addition  
Name: POLK, CARLA R  
Address: 1517 WOODLAWN WAY  
City-St-Zip: GULF BREEZE, FL 32563

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:** PHILLIP POLK

MGRM

04/27/2009

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