

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 31, 2008 8:00 am**  
**Secretary of State**

03-31-2008 90272 043 \*\*\*138.75

**DOCUMENT # L97000001371**

1. Entity Name  
**GULF BREEZE ASSOCIATES LIMITED COMPANY**



Principal Place of Business

**25 BEACH HOMES ROAD  
UNIT 25  
CAPTIVA, FL 33924 US**

Mailing Address

**368 PASSAIC AVE  
FAIRFIELD, NJ 07004**

2. Principal Place of Business - No P.O. Box #

**11537 Andy Rosse Lane**  
Suite, Apt. #, etc.

3. Mailing Address

**P.O. Box 10362**  
Suite, Apt. #, etc.

City & State

**Captiva, FL**

City & State

**Fairfield, NJ**

Zip

**33924**

Country

Zip

**07004-6362**

Country

03242008

Chg-LLC

CR2E083 (12/06)

4. FEI Number

**22-3560217**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**MURTY, TIMOTHY J  
1633 PERIWINKLE WAY, SUITE A  
SANIBEL, FL 33957**

7. Name and Address of New Registered Agent

Name  
**Daniel Andersen**

Street Address (P.O. Box Number is Not Acceptable)

**10101 US Highway 41**

City  
**Palmetto**

**FL**

Zip Code  
**34221**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

**Daniel Andersen**

(NOTE: Registered Agent signature required when reinstating)

**3/24/08**

DATE

**FILE NOW!!! FEE IS \$138.75  
After May 1, 2008 Fee will be \$538.75**

**Make check payable to  
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**MGRM  
ANDERSEN, DAN  
368 PASSAIC AVE  
FAIRFIELD, NJ 07004**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**MGRM  
ANDERSON, JOHN  
368 PASSAIC AVE  
FAIRFIELD, NJ 07004**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**MGRM  
ANDERSON, RUTH  
368 PASSAIC AVE  
FAIRFIELD, NJ 07004**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**MGRM  
ANDERSON, JANET  
368 PASSAIC AVE  
FAIRFIELD, NJ 07004**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**MGR  
Andersen, Daniel  
368 Passaic Ave  
Fairfield, NJ 07004**

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**MGR  
Andersen, John  
368 Passaic Ave  
Fairfield, NJ 07004**

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:**

**Daniel Andersen**

**3/24/08**

**973-244-1900**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #