

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000008273

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: GOLDCOAST DATA VAULT, LLC

## Current Principal Place of Business:

888 SOUTHEAST THIRD AVE., SUITE 501  
FORT LAUDERDALE, FL 33316

## New Principal Place of Business:

888 SOUTHEAST THIRD AVE  
501  
FORT LAUDERDALE, FL 33316

## Current Mailing Address:

888 SOUTHEAST THIRD AVE., SUITE 501  
FORT LAUDERDALE, FL 33316

## New Mailing Address:

888 SOUTHEAST THIRD AVE  
501  
FORT LAUDERDALE, FL 33316

FEI Number: 65-0966782

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FORMAN, M. AUSTIN  
888 SOUTHEAST THIRD AVE., SUITE 501  
FORT LAUDERDALE, FL 33316 US

## Name and Address of New Registered Agent:

FORMAN, M. AUSTIN  
888 SOUTHEAST THIRD AVE  
501  
FORT LAUDERDALE, FL 33316 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:

04/30/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: FORMAN, M. AUSTIN  
Address: 888 SE THIRD AVE SUITE 501  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: MGR ( ) Delete  
Name: BLACKACRE, PARTNERS LTD  
Address: 4300 N. UNIVERSITY DRIVE D 103  
City-St-Zip: FORT LAUDERDALE, FL 33351

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: BLACKACRE, PARTNERS LTD  
Address: 1700 NW 66TH AVE, STE 201  
City-St-Zip: PLANTATION, FL 33313

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: M AUSTIN FORMAN

MGRM

04/30/2009

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