

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M0000000675

1. Entity Name
GBFC DEVELOPMENT, LLC

Principal Place of Business
3470 CLUB CENTER BLVD.
NAPLES FL 34114-0816

Mailing Address
3470 CLUB CENTER BLVD.
NAPLES FL 34114-0816

2. Principal Place of Business
3200 Tamiami Trail N.

3. Mailing Address
3200 Tamiami Trail N.

Suite, Apt. #, etc.
Suite 200

Suite, Apt. #, etc.
Suite 200

City & State
Naples, FL

City & State
Naples, FL

Zip
34103

Zip
34103

6. Name and Address of Current Registered Agent

WOODWARD, MARK J
801 LAUREL OAK DRIVE
SUITE 710
NAPLES FL 34108

Name

Street Address (P.O. Box Number is Not Acceptable)
3200 Tamiami Trail N., Suite 200

City Naples

FL Zip Code 34103

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

10.

ADDITIONS/CHANGES
Fiddler's Creek, LLC
a Delaware LLC
3470 Club Center Blvd.
Naples, FL 34114

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

MGR
FERRAO, AUBREY J
3470 CLUB CENTER BLVD
NAPLES, FL 34114

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

300004376933--7
-06/08/01--01014--004
*****55.00 *****55.00

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change

Addition

TITLE
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Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change

Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Mark J. Woodward* REQUIRED

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

FILED

01 MAY 11 AM 9:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
 Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

7. Name and Address of New Registered Agent

Name

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

3200 Tamiami Trail N., Suite 200

City Naples

FL Zip Code 34103

DATE

ADDITIONS/CHANGES

Fiddler's Creek, LLC Change Addition

a Delaware LLC

3470 Club Center Blvd.

Naples, FL 34114

MGR Change Addition

FERRAO, AUBREY J

3470 CLUB CENTER BLVD

NAPLES, FL 34114

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