

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M03000003748

**FILED**  
**Jul 12, 2006**  
**Secretary of State**

**Entity Name:** GULL LEASING, LLC

**Current Principal Place of Business:**

140B N. ONE DR.  
SAINT AUGUSTINE, FL 32095

**New Principal Place of Business:**

**Current Mailing Address:**

140B N. ONE DR.  
SAINT AUGUSTINE, FL 32095

**New Mailing Address:**

**FEI Number:** 20-0329022      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

MEINERS, LOUIS M JR  
200 AVIATION DRIVE, SUITE 2  
NAPLES, FL 34104 US

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

MEINERS, LOUIS M JR  
3073 HORSESHOE DRIVE SOUTH  
SUITE 210  
NAPLES, FL 34104 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: LOUIS M MEINERS JR

07/12/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MCCUMBER, GARY M  
Address: 140B N. ONE DR.  
City-St-Zip: SAINT AUGUSTINE, FL 32095

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify for the 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: GARY M MCCUMBER

MGRM

07/12/2006

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