## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M05000005872

Entity Name: GULF SIDE, LLC

Address:

City-St-Zip:

129 MILLER ROAD

WINCHESTER, VA 22602

FILED Apr 27, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
75 LEWELI MORGANT	LYN ROAD OWN, WV 20	6508			
Current Ma	ailing Addres	s:	New Mailing Address:		
75 LEWELI MORGANT	LYN ROAD OWN, WV 20	6508			
FEI Number: 20-3435319		FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	Surrent Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
GULFPOR'	AVENUE, SC T, FL 33707	US			
in the State		submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both	
SIGNATUR	RE:				
	Electror	ic Signature of Registered Age	ent	Date	
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MGRM () JARRETT, JOH 107 BEECHVAL CROSS LANES	E DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MGRM () RIDDEL, JOHN PO BOX 542 ROUND HILL, V		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MGRM () EDMOND, CRA 75 LEWELLYN MORGANTOWI	ROAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	MGRM () MARTIN, WILLI	Delete AM ALLEN	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: CRAIG A. EDMOND **MGRM** 04/27/2006