2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000002207

Entity Name: FLORIDA GULF COAST, LLC

FILED Jan 17, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1217 US HWY. 19 HOLIDAY, FL 34691

Current Mailing Address: New Mailing Address:

1217 US HWY, 19 HOLIDAY, FL 34691

FEI Number: 20-4091479 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

STEIGHNER, MARK R **1217 US HIGHWAY 19** HOLIDAY, FL 34691

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:

Date

ADDITIONS/CHANGES:

Electronic Signature of Registered Agent

MANAGING MEMBERS/MANAGERS:

MGRM Title: MGRM (X) Change () Addition () Delete

STEIGHNER, MARK R PRES STEIGHNER, MARK R Name: Name:

1217 US 19 Address: 1217 US 19 Address: City-St-Zip: HOLIDAY, FL 34691 City-St-Zip: HOLIDAY, FL 34691

Title: MGRM Title: MGRM

(X) Change () Addition () Delete COUTO, TERRY Name: COUTO, TERRY Name:

Address: 404 TAMPA ROAD Address: 5442 MILLBROOK WAY City-St-Zip: PALM BEACH, FL 34683 City-St-Zip: PALM HARBOR, FL 34685

Title: MGRM () Delete Title: () Change () Addition

DEBOER, MICHAEL Name: Name: Address: 485 MARINER BLVD. Address: City-St-Zip: SPRING HILL, FL 34609 City-St-Zip:

(X) Change () Addition Title: MGRM () Delete Title: MGRM

Name: MALKI, MICHAEL Name: MALKI, MICHAEL Address: 120 RACE TRACK ROAD Address: PO BOX 8030

City-St-Zip: TAMPA, FL 33626 City-St-Zip: CLEARWATER, FL 33758

Title: MGRM () Delete Title: MGRM (X) Change () Addition

BUREK, BRIAN A BUREK, BRIAN A Name: Name: 1217 US 19 1217 US HWY 19 Address: Address: City-St-Zip: HOLIDAY, FL 34691 City-St-Zip: HOLIDAY, FL 34691

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: MARK R STEIGHNER 01/17/2008