

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000027546

FILED  
Apr 14, 2009  
Secretary of State

**Entity Name:** GATES OF PARK AVENUE, LLC

**Current Principal Place of Business:**

10210-4 SAN JOSE BLVD  
C/O HAKIMIAN HOLDINGS INC  
JACKSONVILLE, FL 32257

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 56678  
JACKSONVILLE, FL 32241

**New Mailing Address:**

**FEI Number:** 06-1708112

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HAKIMIAN, BENJAMIN S  
10210-4 SAN JOSE BLVD  
JACKSONVILLE, FL 32257 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: HAKIMIAN, BENJAMIN S  
Address: 10210-4 SAN JOSE BLVD  
City-St-Zip: JACKSONVILLE, FL 32257

**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 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: BENJAMIN S HAKIMIAN

MGR

04/14/2009

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