

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000000798

**FILED**  
**Apr 25, 2005**  
**Secretary of State**

**Entity Name:** GREGORY L GATES, JR. LLC

**Current Principal Place of Business:**

1509 FOXRIDGE RUN SW  
WINTER HAVEN, FL 338802618 US

**New Principal Place of Business:**

**Current Mailing Address:**

3713 MASTERPIECE ROAD  
LAKE WALES, FL 338988853 US

**New Mailing Address:**

FEI Number: 65-1187137

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GATES, GREGORY L JR.  
1509 FOXRIDGE RUN SW  
WINTER HAVEN, FL 338802618 US

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

GATES, GREGORY L JR.  
3713 MASTERPIECE ROAD  
LAKE WALES, FL 338988853 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: GREGORY L. GATES, JR.

04/25/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: GATES, GREGORY L JR.  
Address: 1509 FOXRIDGE RUN SW  
City-St-Zip: WINTER HAVEN, FL 338802618 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: GATES, GREGORY L JR.  
Address: 3713 MASTERPIECE ROAD  
City-St-Zip: LAKE WALES, FL 338988853 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GREGORY L. GATES, JR.

MGR

04/25/2005

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