

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000002916

Entity Name: GABLES PARTNERS, LLC

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

878 SOUTH DIXIE HWY.
2ND FL
CORAL GABLES, FL 33146

New Principal Place of Business:

3581 N. PROSPECT DR
COCONUT GROVE, FL 33133

Current Mailing Address:

878 SOUTH DIXIE HWY.
2ND FL
CORAL GABLES, FL 33146

New Mailing Address:

3581 N. PROSPECT DR
COCONUT GROVE, FL 33133

FEI Number: 51-0616022

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLAKELY, GERALDINE
878 SOUTH DIXIE HWY. 2ND FL
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

BLAKELY, GERALDINE
3581 N. PROSPECT DR
COCONUT GROVE, FL 33133 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: _____

04/28/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: THE MCCLOSKEY GROUP, LLC
Address: 878 SOUTH DIXIE HWY. 2ND FL
City-St-Zip: CORAL GABLES, FL 33146

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: GERALDINE BLAKELY

MRS

04/28/2009

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