

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000000363

FILED  
Apr 12, 2007  
Secretary of State

Entity Name: GATEWAY 3000 INVESTMENT GROUP, LLC

**Current Principal Place of Business:**

1700 NW 64 STREET  
SUITE 300  
FORT LAUDERDALE, FL 33309

**New Principal Place of Business:**

**Current Mailing Address:**

1700 NW 64 STREET  
SUITE 300  
FORT LAUDERDALE, FL 33309

**New Mailing Address:**

FEI Number: 65-0978494

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GILLESPIE, R. BOWEN  
1515 S. FEDERAL HWY, SUITE 306  
BOCA RATON, FL 33432 US

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

GILLESPIE, R. BOWEN  
1515 S. FEDERAL HWY,  
SUITE 306  
BOCA RATON, FL 33432 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:

04/12/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: KIDWELL, JACK KEITH  
Address: 1700 NW 64 STREET, SUITE 300  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: MGR ( ) Delete  
Name: FISCHER, CHARLES W JR  
Address: 4057 N.E. 5TH TERRACE  
City-St-Zip: OAKLAND PARK, FL 33334

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: JACK KEITH KIDWELL

MGR

04/12/2007

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