

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000003847

FILED
Apr 09, 2012
Secretary of State

Entity Name: GADAL INTERNATIONAL L.C.

Current Principal Place of Business:

14155 U.S. HIGHWAY ONE , SUITE 210
LOGGERHEAD PLAZA
JUNO BEACH, FL 334081499

New Principal Place of Business:

Current Mailing Address:

14155 U.S. HIGHWAY ONE , SUITE 210
LOGGERHEAD PLAZA
JUNO BEACH, FL 334081499

New Mailing Address:

FEI Number: 91-2020342

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOWICKI, MARK J
14155 U.S. HIGHWAY ONE , SUITE 210
LOGGERHEAD PLAZA
JUNO BEACH, FL 334081499 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
Name: TOEPFER, HOWARD
Address: 14155 U.S. HIGHWAY ONE , SUITE 210
City-St-Zip: JUNO BEACH, FL 33408 US

Title: MGR
Name: LENCE, JOHN A
Address: 6027 HIGH STAR DR
City-St-Zip: HOUSTON, TX 77081 US

Title: MGR
Name: LENCE, MARIO V
Address: 6027 HIGH STAR DR.
City-St-Zip: HOUSTON, TX 77081 US

Title: MGR
Name: LENCE FAMILY TRUST
Address: 6027 HIGH STAR DR.
City-St-Zip: HOUSTON, TX 77081 US

Title: MGR
Name: TOEPFER FAMILY TRUST
Address: 14155 U S HIGHWAY ONE, SUITE 210
City-St-Zip: JUNO BEACH, FL 33408 US

Title: MS
Name: NATALEE, LENCE
Address: 6027 HIGH STAR DR
City-St-Zip: HOUSTON, TX 77081

I hereby 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: JOHN A. LENCE

MGR

04/09/2012

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