

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000006458

FILED  
Feb 17, 2004  
Secretary of State

Entity Name: GAMBLE PROPERTIES, L.L.C.

**Current Principal Place of Business:**

2101 CANTU COURT  
SARASOTA, FL 34232

**New Principal Place of Business:**

**Current Mailing Address:**

2101 CANTU COURT  
SARASOTA, FL 34232

**New Mailing Address:**

FEI Number: 65-1100746      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

DOERR, KENNETH D  
240 SOUTH PINEAPPLE AVENUE, 10TH FLOOR  
SARASOTA, FL 34236 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: JOHN, GAMBLE  
Address: 2101 CANTU CT  
City-St-Zip: SARASOTA, FL 34232

Title: MGR ( ) Delete  
Name: WILLIAM, GAMBLE J IV  
Address: 2101 CANTU CT  
City-St-Zip: SARASOTA, FL 34232

Title: MGR ( ) Delete  
Name: KAREN, GAMBLE L  
Address: 2101 CANTU CT  
City-St-Zip: SARASOTA, FL 34232

Title: MGR ( ) Delete  
Name: AMIE, HILTBRAND M  
Address: 2101 CANTU CT  
City-St-Zip: SARASOTA, FL 34232

**ADDITIONS/CHANGES:**

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

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

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 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: JOHN R. GAMBLE

MGRM

02/17/2004

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