2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 05, 2004 08:00 AM
Secretary of State

DOCUMENT # L01000011851

1. Entity Name
GEMINI PROPERTY MANAGEMENT, LLC

Principal Place of Business	Mailing Address
100 VILLAGE SQUARE CROSSING SUITE 105 PALM BEACH GARDENS, FL 33410	100 VILLAGE SQUARE CROSSING SUITE 105 PALM BEACH GARDENS, FL 33410

DO NOT WRITE IN THIS SPACE

03192004 No Chg-LLC CR2E083 (10/03)

4. FEI Number
65-1139983
Applied For
Not Applicable

5. Certificate of Status Desired ☑ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

RIETWYK, THOMAS
100 VILLAGE SQUARE CROSSING
SUITE 105
PALM BEACH GARDENS, FL 33410

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	RIETWYK, THOMAS
STREET ADDRESS	100 VILLAGE SQUARE CROSSING STE 105
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410
TITLE	
NAME	
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05/06/04-80017-023 55.00

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11. I hereby certify that the information supplied with this filing does not qualify 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 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: _____ 3-31-2004 561-207-6100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #