

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000000692

FILED
Apr 29, 2005
Secretary of State

Entity Name: G & D REAL ESTATE HOLDINGS, LLC

Current Principal Place of Business:

4114 NORTHLAKE BLVD.,
SUITE 200
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

4114 NORTHLAKE BLVD.,
SUITE 200
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 40-0000713

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GORDON, ROBERT E
4114 NORTHLAKE BLVD.,
SUITE 200
PALM BEACH GARDENS, FL 33410 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: MGR () Delete
Name: GORDON, ROBERT E
Address: 6124 WILD OAT RUN
City-St-Zip: WEST PALM BEACH, FL 33412

Title: MGR () Delete
Name: DONER, ADAM S
Address: 1770 BREAKERS POINTE W
City-St-Zip: WEST PALM BEACH, FL 33411

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

Title: MGR () Change (X) Addition
Name: CALAMUSA, STEVEN G
Address: 135 EDGEWOOD DRIVE
City-St-Zip: WEST PALM BEACH, FL 33405

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: ROBERT E GORDON

MGR

04/29/2005

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