2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

STREET ABORESS CITY-ST-ZIP

FILED Apr 13, 2005 08:00 AM Secretary of State **DOCUMENT # L02000003876** 1. Entity Name GATE HOUSE REALTY LLC Principal Place of Business Mailing Address 7165 W. INTERNATIONAL CT 7165 W. INTERNATIONAL CT HOMOSASSA, FL 34446 HOMOSASSA, FL 34446 US CR2E083 (10/03) 01102005No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 04-3603744 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE TANZER, PHILIP A 8 SWEET WILLIAM CT HOMOSASSA, FL 34446 IN THIS SPACE 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. (NOTE: Registered Agent afgrature required when releasating) DATE Signature, typed or printed name of registered agent and title it applicable Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE TANZER, PHILIP A NAME U00100302722 04/13/05-80083-008 50.00 8 SWEET WILLIAM CT STREET ADDRESS CITY-ST-ZIP HOMOSASSA, FL 34446 TITLE NAME STREET ADDRESS COY-ST-7P TITLE NAME STREET ADDRESS DO NOT WRITE CXTY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-7/P NAME

11. I hereby certify that the information supplied with this filling 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 fliability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

AME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE