## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

## Apr 07, 2005 08:00 AM Secretary of State DOCUMENT # L02000008164 GATEWAY PARTNERS, LLC Principal Place of Business\_ Mailing Address 8055 S. MILITARY TRAIL 8055 S. MILITARY TRAIL BOYNTON BEACH, FL 33436 BOYNTON BEACH, FL 33436 04012005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 42-1573697 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GRIESMER, PAUL DO NOT WRITE 8055 S. MILITARY TRAIL BOYNTON BEACH, FL 33436 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 SIGNATURE Signature, typed or printed name of registered agent and fills if applicable. (NOTE Registered Agent signature required when reinstating) U00000292623 04/07/05-80078-020 50.00 Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE GRIESMER, PAUL NAME STREET ADDRESS 8055 S. MILITARY TRAIL CITY-ST-ZIP BOYNTON BEACH, FL 33436 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME

**FILED** 

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 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 effect of the state of the state of the same legal effect as if made under oath, that I am a managing member or manager of the siver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. I hereby certify that the information indicated on this report is true and

SIGNATURE: