

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000012134

Entity Name: GATOR TREATS 2, LLC

FILED  
Aug 31, 2004  
Secretary of State

## Current Principal Place of Business:

8525 NW 6TH AVE.  
C/O PETER SCHER  
GAINESVILLE, FL 32607

## New Principal Place of Business:

3443 ARCHER ROAD  
A-3  
GAINESVILLE, FL 32608

## Current Mailing Address:

8525 NW 6TH AVE.  
C/O PETER SCHER  
GAINESVILLE, FL 32607

## New Mailing Address:

3443 ARCHER ROAD  
A-3  
GAINESVILLE, FL 32608

FEI Number: 56-2337450

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHER, PETER  
8525 NW 6TH AVE.  
GAINESVILLE, FL 32607

## Name and Address of New Registered Agent:

SCHER, PETER  
3443 ARCHER RD  
A-3  
GAINESVILLE, FL 32608

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: PETER SCHER

08/31/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

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

## ADDITIONS/CHANGES:

Title: MGRM ( ) Change (X) Addition  
Name: SCHER, PETER H OWNER  
Address: 3443 ARCHER ROAD, A-3  
City-St-Zip: GAINESVILLE, FL 32608

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: PETER SCHER

MGRM

08/31/2004

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