2007 LIMITED LIABILITY COMPANY' ANNUAL REPORT

DOCUMENT # L03000012683

1. Entity Name

GARGOYLE PROPERTIES, L.L.C.



FILED Jan 31, 2007 08:00 AM Secretary of State

Principal Place of Business

4626 W SUNSET BLVD TAMPA, FL 33629 US Mailing Address

4532 WEST KENNEDY BLVD. PBN #329 TAMPA, FL 33609 US



01122007 No Chg-LLC

CR2E083 (11/05)

| DO NOT WRITE IN THIS SPACE | 4. FEI Number NOT APPLICABLE | | Applied For Not Applicable |
|----------------------------|----------------------------------|----------|----------------------------|
| | 5. Certificate of Status Desired | <u> </u> | \$5.00 Additional |

| 6. Name and | Address of | Current Registered | Agent |
|-------------|------------|---------------------------|-------|
| | | | |

SMITH, MELISSA D 4626 W SUNSET BLVD TAMPA, FL 33609

DO NOT WRITE IN THIS SPACE

| the obligat | ons of registered agent Signifure: Inted or printed name of registered agent and bite if applicable. (NOTE: Registere | ed Agent signature required when reinstating) DATE |
|---------------------------------------|--|---|
| FI Di | ling Fee Is \$50.00 ue by May 1, 2007 | |
| 9. | MANAGING MEMBERS/MANAGERS | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP WEGESGHELDE, FRED D 4626 W SUNET BLVD TAMPA. FL 33629 | U00000611780 02/02/07-80076-017 55.0 |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | |
| 11. I hereby i | certify that the information supplied with this filing does not qualify for the e | exemptions contained in Chapter 119, Florida Statutes. I further certify that the information |

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

11. I nereby certify that the information supplied with this tiling does not qualify for the exemptions contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/12/07

813 805 965

Daylime Phone #